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OBSERVATIONS ON SELECT SUBJECTS IN SURGERY.
BY MR. SIMMONS.

(Continued from pp. 289—294.)

PULMONARY OSSIFICATIONS.

OSSIFICATIONS, or bony concretions, out of the usual course of nature, are most frequently met with in the investing membranes lining cavities, such as the pleura and dura mater; and in the arterial system, as in the aorta, and its various ramifications. The elements which constitute bone may be deposited in any other part of the body, though less frequently found so; and I am now about to record some specimens, in which the deposition had taken place in the lungs. These osseous concretions were found at the root of the lungs, on each side of the chest, and I apprehend, had not much impeded respiration, as in other respects there was no appearance of disease. But I am not acquainted with the previous history of the case.

TENDINOUS OSSIFICATIONS.

Concretions of bone in the voluntary muscles are, I believe, seldom met with. Two or three instances only have fallen under my observation; and in these the bone had formed in the tendinous expansion of the biceps flexor cubiti. In the one, of which a representation is here given of the ossification, the motions of the left arm were so impeded by it, and attended with so much pain, that the young man requested me to take it out for him, which I did accordingly. The wound healed without any trouble, and he had afterwards the full use of his arm.

ON THE GENERAL TREATMENT OF CONTUSION.

It is hardly necessary to define what is meant by a contusion, or, in common language, a bruise, it is in general so well understood; nor is it less generally known, that it

is occasioned by force, or external violence. Its effects however are greatly diversified, and depend not only on the peculiar structure of the part injured, but also on the degree of violence exerted in inflicting the injury. When the shock is general, with or without any particular organic lesion, the vital powers are so depressed as, in some instances, to threaten a temporary suspension of them; yet in proportion to the magnitude of the effect on the system, is the necessity for the withdrawing of blood very generally rated. But, I have long considered the practice founded on this opinion as at least erroneous; and under this persuasion, instead of employing the lancet, I apply warmth to the extremities, and let the patient take of warm and transient stimulants, in order to promote perspiration without inflaming the habit. If the reaction afterwards should be considerable, then I order phlebotomy, fully and freely, as the symptoms may indicate; and exhibit saline purgatives in doses adequate to produce copious evacuations. But, in the febrile state, instead of saline mixture, or preparations of antimony, I have for some years substituted the digitalis, in half-grain doses, along with an equal quantity of opium, every six hours. The well-known properties of the digitalis of acting upon the absorbents, and lowering the pulse, point it out as a remedy well calculated to promote the absorption of the extravasated fluids in contusion, as well as to prevent the necessity of profuse and excessive bleeding, and in both these intentions my wishes have been fully realized by it.

Excoriation, and Ulcers on the Glans and Prepuce.

Some men are subject to a discharge from the glans and prepuce, which at times is very troublesome to them, and not only productive of extensive excoriations, but not unfrequently these degenerate in parts into small ulcers. Those who have an irritable skin, and in whom the prepuce is somewhat contracted, are most susceptible of these affections. In general, a vitriolic, or other astringent wash, will very soon suppress this increased secretion, and heal the ulcers; and the recurrence of both may be prevented by ablution with soap and water two or three times a week. When the ulcers are intractable to such applications, it will become needful to destroy their surface with the nitrated silver, or vitriol of copper. No internal medicine

dicine is required, as the disease is entirely local, and has nothing of syphilis in it. In one case only I was baffled for some time; in this the secretion was suppressed by the means above recommended, but the ulcers, several in number, although their surface was repeatedly destroyed, were successively covered with a whitish coloured coat, and would not heal. I at length discovered, that the patient, in his anxiety, was very frequently looking at and washing the ulcers with warm water; and, upon the supposition that their obstinacy proceeded from this cause, the crust acting as a defence to the tender surface underneath, I advised him to desist from such frequent dressings, and not to expose them oftener than once a day; and, upon following this advice, they were all cicatrized in a few days.

The female organs are obnoxious to a similar affection, which, in these, is curable by the like means.

On White Gangrene

Soon after my attendance on the home patients commenced at the Manchester Infirmary, &c. in the year 1790, I was called to see two cases of gangrene, in which the sloughs had assumed an opake whiteness, instead of the dark hue of gangrenous exfoliations. In both these instances the patients were females, who were in the last stage of dropsical debility; and in each the slough had formed upon the upper side of the foot, just below the instep. It might be said, with almost literal veracity, that both these patients were exanguious, so pallid were they, and destitute of invigorated action. It is hardly necessary to observe, that both these women died; nor can a recovery under such circumstances be rationally hoped for. To produce such appearances of extreme feebleness, life, gradually wasted, must be on the eve of extinction, and render all means of support ineffectual.

On an Enlargement of the Uterus.

Owing to an accident, I am prevented from supplying a drawing of this singular instance of enlargement of the uterus. Nevertheless, a verbal description of it may not be entirely uninteresting, though not attended with any practical utility. With the early history of the case I am unacquainted, having seen the patient a short time only before her decease. But, after death, I, with some difficulty, possessed myself of the uterus, which was enlarged to a very considerable magnitude, for it weighed twenty-four

pounds avoirdupois. The diseased alteration consisted not in any scirrhosity, or cancerous induration, but in an enlargement or distention of the uterus, produced by the deposition of carnous layers within its cavity, with here and there membranous intersections that formed bags, which were filled with a limpid fluid. Both the ovaria were sound, as well as the round and broad ligaments. The neck of the uterus had disappeared, as is customary in advanced pregnancy; but the vagina and os uteri were smooth, and free from any morbid appearance whatever. With very little force, I passed a long silver probe through the os tincæ, between the inner surface of the uterus and the layer contiguous to it, down to the fundus uteri; which pretty clearly indicated, that the layer was a deposition merely, and had not firmly agglutinated. And this opinion is further corroborated by the not very irregular flowing of the catamenia (as she herself informed me) till it ceased spontaneously only a few years before her death. The appearances in the abdomen were those of chronic peritoneal inflammation; several of the viscera were coated over with layers of coagulable lymph, that had assumed an almost membranous consistence; and there was also a quantity of a wheyish coloured fluid, interspersed with lumps, and broken membranous coats of lymph coagulated. The pressure of this enormous mass had likewise occasioned a contraction in the upper portion of the rectum, so that at times, she was troubled with obstinate costiveness.

On the Adipose Sarcoma.

The opinion that the Adipose Sarcoma originates in the deposition of coagulable lymph, may perhaps admit of some exceptions. One is, that the adipose cells themselves may, to a limited extent, receive such a morbid impression, as to lead to the formation of sarcoma, which would thence progressively augment in bulk.

H. A. ætat. 36, had a sarcoma about the size of an orange, situated above, and posterior to the hip, on her right side, the growth of which, as it was then of two years standing, had been slow, and unattended with pain. On the 4th of February, I removed it by incision; and on examination after its removal, one lobule, of equal magnitude with the rest, evidently consisted in an enlargement of an adipose cell, whose colour and consistency were scarcely altered, though the other lobules, apparently of the same origin, had acquired the customary degree of density.

Contiguous

Contiguous to the tumour, the adipose substance was abundant, and in parts indurated, so as to require the extirpation of a considerable portion of it also; but whether the induration was the effect of disease or of pressure, I am unable to say.

On the Hydrocele.

The term Hydrocele is technically restricted to a collection of watery fluid in the tunica vaginalis of the scrotum, although it might designate the accumulation of a limpid fluid in any other part of the body with equal propriety.

In the treatment of this complaint it has been proposed to relieve the present incumbrance by what has been called the *palliative* cure, which consists in puncturing the sac with a small trocar, and letting out the water. For obtaining the second or *radical* cure, surgeons have recommended many different methods, the principal of which are, 1. Incision; 2. Excision of the cyst; 3. Caustic; 4. The tent; 5. The seton; 6. Injection. But as the latter gives comparatively little pain, and excites only a very manageable degree of inflammation, it is now very generally preferred in practice. To facilitate the execution of it, therefore, I have invented a small silver tube, the taper end of which is made to fit accurately into the canula of the trocar; and the other extremity, of a larger diameter, is marked with several circular grooves like a glyster-pipe. To this extremity a bladder, to contain the stimulating fluid for injection, may be appended, in the manner of arming a glyster-pipe with a bag; and, if a bladder of a proper size be chosen, whatever may be the dimensions of the cavity, it may be fully distended by the fluid thus expressed.

The spontaneous cure of a hydrocele is not a very common occurrence; I once met with an instance of it in an elderly man, who had carried the disease for several years. At length the distention became excessive, and similar to what takes place in an over distension of the urinary bladder; a circular slough formed about the bigness of a shilling, near the middle of the tumour on the anterior surface. On the exfoliation of the slough, the general cavity was exposed, and inflamed throughout so completely, as to prevent any re-accumulation of fluid.

I saw this man several years afterwards, when he had suffered no return of the complaint.

Explanation

Explanation of the Plates.

Plate 1.—In this plate the upper figure represents the small hook, recommended for the net-retractor in amputation; and the lower one the file; the back of which should be somewhat broader than is here delineated.

Plate 2.—Is a delineation of the steatoma, in which will be observed the lobulated appearance of that species of tumour, and the lobe, with a narrow neck, that was descending towards the left clavicle. The portion of skin that was left adhering, is also distinctly marked.

Plate 3.—In plate the third is represented the scrofulous testis, and diseased portion of omentum. In the upper figure is seen the morbid appearance assumed by the body of the testis after its exposure, by a longitudinal section. The cord at the lower extremity is the vas deferens, which was inserted into the cleft between the two hemispheres.

In the lower figure, the tuberculated border is the part of the omentum that was diseased.

Plate 4.—Is represented the alteration of structure produced in the testicle by scirrhus, before any degree of ulceration had taken place, or the spermatic cord had enlarged. The appearances are very accurately given.

Plate 5.—In plate five, the morbid appearances exhibited by cancer in the ulcerated stage are delineated. The drawing was made from the breast of a married woman, not very young, who had borne many children. The ulcerated parts around the nipple are duly characterized, as well as the scirrhous knots to the left, which are common in the advanced stage of cancer.

Plate 6.—In plate six, O. L. represents some specimens of pulmonary ossification; and O. E. a longitudinal section of one of these; the moiety to the left representing the inner, and the other to the right, the outer structure of an ossification of larger dimensions. O. T. exhibits the ossification taken out of the tendinous expansion of the biceps flexor cubiti.

Plate 7. Fig. 1 in the engraving, refers to the silver tube. Fig. 2, to the canula of the trocar. Fig. 3, to the canula and tube in conjunction. They are all represented of the natural size.

If any utility should acrue from the publication of these drawings, the public will feel its obligations to the ingenious Mr. Patrick Mac Morland, by whom I have been favoured with them. They are faithful representations of Nature, and are executed in a style of peculiar neatness.

To

To the Editors of the Medical and Physical Journal.

"Suum cuique."

GENTLEMEN,

THERE is no art or science, I believe, in which so frequent contentions have taken place respecting discoveries, so much animosity and ignorance displayed in their controversies, or such injustice done in conferring the honors due to merit, as in our profession. Teachers and men of eminence oftentimes not content with that praise which is justly bestowed on them, are ambitious of immortalizing their fame by some great discovery or improvement; and are not ashamed to steal the laurels from the brow of one to whom they are indebted, and impiously endeavour to crown themselves with the pilfered honours. Knowing that nothing imposes on the world so much as modesty, they claim no merit to themselves, "their discovery was the effect of accident," or from the improvement being of extensively beneficial consequence, it could only be "by inspiration." Their characters being established, the justice of their claims is admitted by the ignorant part of the profession, who never fail in hailing that person as the discoverer, who first informed them of it. Their works being copied and quoted, impose on men of superior abilities, who are always desirous to bestow applause where they think it justly due. Thus their claims to discoveries and improvements, to which they have not the slightest right, receive the united sanction of time and ignorance. Hence we have the *foramen Monroianum* and *antrum Highmorianum*; and, what led me to make these remarks, the introduction of the ligature attributed to Ambrose Parée. To this author has this improvement always been ascribed by the French surgeons, from that national vanity which induces them to claim for their countrymen every discovery and improvement in every art and science. A very voluminous work, wherein the subject of diseased and wounded arteries is most voluminously treated, has caused Parée's claim to be pretty generally acknowledged in this country. That this author should adopt this error, I am not surprized, as his writings prove him very conversant with the works of other French surgeons besides Parée. But my astonishment was excited, on seeing it supported by Mr. Simmons of Manchester, in a very excellent paper in your Journal, on Amputation. I can hardly suppose Mr. S.

 unacquainted

unacquainted with the writings of Celsus, the Father of Surgery; for fear he should have forgot it, I shall quote a passage, which will completely refute the claim of Parée to the merit of introducing the ligature. In his 26th Chapter, Lib. iii. entitled "Curatio adversus Profusionem Sanguinis in Vulneribus," after mentioning dry linen, sponges squeezed in cold water, linen moistened with vinegar, and caustic medicines; he says, if these should not succeed, we must effect the same thing by milder means. "Sed, si semel ad ea decurritur, potius quæ mitius idem efficiunt," which he thus describes, "Quod si illa quoque profluvio vincuntur; venæ quæ sanguinem fundunt, apprehendendæ circaque id, quod ictum est, duobus locis deligandæ intercidendæque sunt, ut et in se ipsæ coeant, et nihilominus ora præclusa habeant." Nor is Celsus the only author who mentions it. Paulus Ægineta not only used it in wounded arteries, but practised it in cases of aneurism, in the same manner as it is done at present. That Parée was acquainted with these authors I will not assert; but thus much may be safely averred, that the Italian surgeons, with whom Parée had such frequent intercourse in the different incursions of Henry IV. the greatest and wisest of monarchs, into Italy, were ignorant neither of their opinions or their practice; and it is more than probable that Parée learnt it from them. The ligature is also mentioned by Rufus and several other writers of antiquity.

CHIRURGICUS.

A Case of Mollities Ossium during the Growth of the Body; *communicated by* Dr. Trotter, *of Newcastle.*

W. T. a healthy, active boy, in his fifteenth year, began to grow exceedingly fast; so that in the space of twelve months, his height was increased from sixteen to eighteen inches. With this he looked slender, was extremely thin, and his head stooped, and rather inclined to the one shoulder. He now felt himself very weak, and was unequal to any kind of exercise, from the sudden fatigue which it induc d. During all this change of appearance, no medical person was consulted, and his father and mother, of their own accord, thought sea-bathing would be the means of restoring his strength, as the rapid growth of the body seemed the sole cause of the debility, without any sign of disease. The

The sea-bathing, at first, was thought to have considerable effect, and he appeared to mend, when, all at once, his appetite failed, the debility increased, and he was incapable to sit up. It was now that pain and uneasiness were felt about the second *cervical vertebra;* and he was unable to sustain his head. In this condition he was brought home; his height upwards of six feet. I saw him on the 24th of August last: at that time he laboured under an almost *general paralysis* of all the muscles of the body, except those of the eyes, nose, and ear; even the muscles of the tongue were affected, and deglutition was difficult. It was plain that the muscular power was impaired, so far as it depended on free communication with the nerves originating from the *medulla spinalis.* The desire for food was almost gone; the intestinal canal was so torpid, that nothing but active purgatives kept the body open; and the urine was voided with the utmost difficulty, in small quantity. The *dyspnœa* which attended was peculiar; not like that of the phthisical or asthmatic state, or what is observed in pneumonic inflammation; but was free or laborious at unequal intervals. The pulse was singular in its motions, alternately quick and slow, distinct or irregular, with, sometimes, long intermissions. He lay in the horizontal position; every limb was immovable, and could not turn the head a single inch to either side.

From the wry head, and the general immobility of the muscles, I was naturally led to examine what was called a swelling in the neck. The thinness of the flesh made the diseased part appear very plain. The tumor was certainly osseous; the head, with the *atlas,* was thrown forward, and the *processus dentatus* of the second *vertebra* could be distinctly felt, so that a partial dislocation of these bones had taken place. Independent of compression on the spinal marrow, from this cause it was probable, there was also some deposition of bony matter, or elongation of the intervertebral cartilage; for it was not known how long these bones had been affected. On the whole, from the symptoms enumerated, I was inclined to form a very unfavourable *prognosis;* and I could not help informing the parents of the youth, that the danger was imminent.

The treatment which I recommended was chiefly directed to *strengthen the body.* The diet was ordered to be as nutritious as the deficient appetite would allow, and to consist of animal matter. A *smart blister* was immediately laid over the *vertebra dentata,* and stimulating applications were

were rubbed along the spine. A mixture of *decoct. cinchonæ, sp æther. nitros. sp. ammon. comp.* and *cret. præparat.* with a draught of *tinct. opii* at bed-time, were the medicines. The *carbonate of lime* was partly suggested to correct acidity; but it might be beneficial in supplying calcareous substance to the imperfectly hardened bones. Some experiments of naturalists inform us, that fowls lay eggs without shells, if they are deprived of gravel, or food that does not yield calcareous matter; so, in the rapid growth of a bone, a similar deficiency may be suspected.

Under this treatment, the powers of Nature so far improved, that in ten days the danger of life disappeared; the sleep became refreshing, the appetite increased, the bowels regular, urine made with ease, and the pulse distinct and equal. On the right side, the power of motion so far returned, that he could raise the arm to his mouth; but, from that time, little further recovery has taken place; and there is every reason to believe, that the spinal marrow is permanently compressed; at least, his parents seem to look for no farther medical aid.

I have called this case *mollities ossium*, without any reference to a diseased state of the bones: I only mean, that they are soft, from rapid growth. The *cervical vertebræ* were evidently incapable of supporting the weight of the head; and from the office of the *processus dentatus*, being chiefly for that purpose, by its soft consistence, joined to the weakened ligaments and muscles, the *atlas* was partially thrown from its situation. This is not a common case; Nature seldom leaves her work so imperfect. I apprehend something might have been done, in the early stage of the complaint, by mechanical means: some sort of prop, or lever, to sustain the head equally between the shoulders, so as to ease the *cervical vertebræ*, I think, might be still serviceable. I should be glad to have the opinion of your Surgical Correspondents on the subject.

The patient is a most promising young man: has made considerable progress in Grecian literature, and excels in the knowledge of the Latin and French languages.

Here is a fine illustration of that sympathy of parts, which is spread by means of nervous communication: the loss of motion, in the muscles which turn the head; difficult deglutition; unusual dyspnœa; impeded motion of the heart; anorexia; constipation; dysuria, &c. all of which may be referred to those frequent inosculations which the eighth, ninth, and tenth pairs of nerves of the

head

head have with those of the cervical and spinal nerves, forming a vast circle of smpathetic feelings.

April 4th, 1805.

P. S. I am much obliged to your ingenious correspondent, Mr. Fogo, for his explanation of my case of the lady, in 68. By turning to it, he will find, I did not mean to defend the designation. It was only proper, in publishing it, to give it a name. A man of Mr. Fogo's systematic ideas of pathology, could never have committed such a blunder as to call it *pleurisy*.

T. T.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

READING the paper with the signature of a Constant Reader, and entitled Diagnosis of Syphilis, in your Journal for December, 1804, led me into a train of thoughts, respecting the protracted and improper exhibition of mercury in venereal cases.

I do not mean this as any imputation against the ingenious author of the said paper, but quite the reverse; for it appears, from his candid statement of the case, that prudence, and the received opinion of many respectable authors, would induce any one to act in a similar manner, when unaided by that confidence which can only arise from extensive practice and observation; even with these advantages, the most skilful are sometimes deceived. It is not my intention to comment upon the case, as I am persuaded there is not much deference due to anonymous communications: I shall therefore confine myself chiefly to such remarks as have been the consequence of practical notes, included within the sphere of my own practice.

I have to observe, in the first place, that the diagnostic marks of syphilitic sores are not so well defined by the most accurate writers, neither indeed can be, as to enable a medical person to affirm positively, on inspection, that the criteria correspond so exactly with the general description of such sores, that they do infallibly originate from this source; far otherwise: I believe, the generality of practitioners will not be ashamed to acknowledge, with me, that they have been deceived plus qu'une fois.

I, the other day, was sent for to visit a girl, aged twelve years. On examining the fauces, I found the velum pendulum

dulum palati, on each side ulcerated, exactly corresponding with the appearance which venereal sores assume: yet the remedies employed in cases of common cynanche soon effected a cure.

A young countryman placed himself under my care lately, for the cure of an ulcerated bubo. He informed me, that the medical gentleman who treated his complaint, prior to his application to me, had given him large quantities of pills, which, I suppose, were of calomel, as they had occasioned an incessant purging for some weeks. The patient, perceiving himself decline in health, and his sore growing larger, imagined his treatment was not agreeable to the rules of art, and changed his surgeon, which proved to be a fortunate circumstance, for a sinus had already formed itself, extending from the inferior border of his callous ulcer, along the edge of the scrotum, stretching towards the anus, in the direction of the rapha perinæi. I supposed, from the emaciated appearance of my patient, and excessive discharge from the groin, that his habit had either been supersaturated with mercury, or, that he was so much reduced, as to forbid the adoption of any treatment, save that which was calculated to restore lost stamina. On these premises, I desired him to leave off the pills, and, instead of a sparing diet, which he had been ordered to live upon, I caused him to pursue a plan diametrically opposite, and administered opium, in sufficient quantities to allay irritation, and suppress the purging: by the assistance of strong jellies, good port, ale, &c. he was easily restored to a better state of health. At the expiration of a month, finding the discharge from the bubo still ichorous, without any amendment in appearance, (it still exhibited an inflamed margin, with a white sloughy bottom) I thought myself justified in directing a drachm of ungt. hydrarg. to be rubbed into the thigh of the affected side; but he did not persevere in the use of this medicine for more than a week, when colloqnative night-sweats commenced, which determined me to abandon its use altogether, and confide in the tonic plan which I had set out on; aiding my efforts to heal this obstinate sore by the use of adhesive strips of plaster, *compresses*, and a tight roller, that was passed round the body and upper part of the thigh, in such a manner as to form a figure of eight, beginning by pinning it round the ilia, as is done in cases of amputation. I soon had the happiness to find this method succeed; the callosity disappeared, and the cicatrizing process was soon completed, by managing the bandage so as

to

to cause it to press immediately on the edges of the sore. And here I beg leave to observe, that there is frequently more done by the ingenuity of the surgeon, than by the most elaborate directions which can be given for the treatment of such cases; for I am fully persuaded, that two patients in an hospital, circumstanced exactly alike, if under the care of two dressers, who are not equally attentive to a number of nice and delicate alterations, necessary to be made in dressing, according to the various appearances which wounds put on, will experience great difference with respect to the termination of their complaints.

I wish to embrace this opportunity of recommending the application of graduated compresses, and firm bandaging in similar cases; conscious that great benefit is to be derived from this mode of dressing.

I believe several of the profession are in the habit of using mercury too liberally, in cases of bubo, very much to the prejudice of their patients, and disgrace of this remedy, which is still considered the sine qua non in venereal affections. An intimate medical acquaintance of mine, who had a chancre, succeeded by its usual concomitant, bubo, treated himself, secundum artem, by rubbing in a small quantity of ointment; but, being of an irritable habit, he was disappointed in his hopes of discussing it; the discharge was great, and it assumed a virulent aspect; he again had recourse to mercury, and took a combination of calomel with opium. Before he had used twenty grains, he found himself worse in every respect, and had profuse night-sweats, with a train of nervous disorders. Feeling himself staggered with respect to the nature of his complaints, and wavering concerning their proper treatment, he applied to a medical friend, who advised him, by all means, to desist from the further use of mercury, and to confide in a tonic course of medicine and diet, which soon restored him. From these and similar occurrences, which have come within the circle of my notice, I am inclined to suppose, that the sufferings of patients are frequently unnecessarily prolonged. Indeed, it would be fortunate if the evil ended here; but it is to be lamented, that deprivation of the power of procreation, premature death, and old age, may be included in the long catalogue of miseries, arising from the intemperate administration of this potent medicine. Yet, I must acknowledge, it is much easier to detect mal-practice, in this complaint, than to point out the precise point where to desist. The observations I have made, from a variety

of

of cases, embolden me to remark, agreeably to my own opinion, that local venereal complaints, such as chancres and buboes, require much less mercury than what is, in general, so liberally bestowed upon them. When we are enabled to discuss a bubo, I suppose, for the most part, the mercury arrests the enemy in his citadel, and, by destroying him there, prevents him from doing any further mischief; but some imagine, on his forsaking his position, that he has only retreated to appear in a more formidable manner; and, on the strength of this supposition, pursue a foe which they had already vanquished and totally annihilated. With respect to confirmed cases of lues venerea, the most expert are often left to grope in the dark, as if this path of science had been intentionally obscured, in order that the devotees of Venus should be severely punished for their illicit amours.

It is well known, that patients, ill of a confirmed lues, find their sufferings alleviated, when the mercury begins to act on the system; and when continued a certain time, so as to keep up a slight soreness of the mouth, by way of convincing us that the remedy pervades every part of the body, many of the complaints vanish, whilst others remain in statu quo, and not unfrequently become worse. When this is the case, it appears to be time to desist from its further use; more particularly, if languor, debility, and night-sweats commence. Should this opinion be founded on truth, it would appear, that more attention ought to be paid to the feelings of the patient, than the unfavourable aspect of certain remaining local complaints, that are continued from diseased action, brought on by accumulated irritability, the natural consequence of the powerful excitement which is produced by the mercury. Some people imagine, when there is a chance of erring, that it is adviseable to adhere to what they consider the safe side; thinking it best to push the mercury, fearing that the smallest relaxation may be productive of the most fatal consequences, when, in fact, they have nothing to dread: for if the system has been well saturated with the antidote, why not lie by on their oars a little, and see which way the tide sets. If the patient should become importunate, let the example of Hunter be imitated, by way of *a placebo*, give him a bread pill! I must now conclude the subject; which, I hope, will be resumed by some of your correspondents, whose time and talents will enable them to do more justice to it than,

Your's, &c.

Romsey, March 11, 1805. RALPH CUMING.

Case of Bŭnŏsĭs, apprehended to be spurious.

ON December 15, 1804, a female infant, about eight weeks old, was inoculated in the upper part of the right arm, by a gentleman of the faculty, with a lancet armed with bunoserous pus. To prevent the blood escaping, and the effect of the inoculation being thereby lost, her father pressed his finger for a time upon the wound; but not without drawing away from it a considerable spread of blood upon his finger: whence he apprehended, that the pus might also have escaped, and the communication of the disorder not have been effected.

By the eighth day, Saturday, the 22d, a pustule, of nearly the circumference of a seven-shilling piece, had formed at the place of incision, of a yellowish hue, with a dark dent in the middle, the whole surrounded with an areola of inflammation, about the size of a half-crown piece, which, in a day or two more, was rather extended than contracted. In a very few succeeding days, the dark dent assumed a greenish colour; and, in a night or two after, was lost, by coming away with a considerable discharge of pus upon the sleeve. The yellow cast of the pustule, as it dried, turned of the colour of gum, or resin; and, in the centre, a deep hole sufficient for a pin's head continued, whence the discharge first came, and again in a few succeeding nights.

In progress the pustule continued, taking rather a darker shade of brown, and cracked into a furrow right across, with another, meeting it about the middle, at right angles. It also continued rising from the arm; and in the night of the 11th of January, the crust separated from the skin, and no more appeared. The pustule being in its appearance so like to the effect of a former bunosism in the same family, which was proved genuine, the sentiments of Mr. Ring, Dr. Walker, &c. are requested upon it, by

Yours,

Jan. 14, 1805. EOSACO.

To Dr. BRADLEY.

DEAR SIR,

WHEN I last addressed you on the subject of Vaccination, and on the true diagnosis of Small-pox, I did it with a degree of confidence which many of your readers may think rash. However, as I produced all my authorities, I hope that circumstance will be considered, if not a sufficient

ficient apology, at least a fair introduction to my present confession. I first was induced to search for the slough, which lines the foveolus in small-pox by Mr. Hunter's paper. Astonished at the facility with which it presented itself, it became my amusement to exhibit it, whenever I met with the disease. At the S. P. Hospital, I discovered and exhibited it to the surgeons of that charity in every case I examined. In private practice I shewed it to Mr. Pitcairn. On my return to England I prevailed on Mr. King, of Clifton, to look for it, who had no more difficulty in detecting it than myself; and before I used the strong language with which my last concludes, I conversed with Dr. Willan, who confirmed me in a presumption which was strong enough before.

With all this confidence, nothing seemed to remain but an opportunity, by the return of the disease, of exhibiting the slough to such as would have the best means of communicating this diagnosis. Dr. Hooper has favoured me with this opportunity; but, to my great mortification, I could not exhibit the slough. However, on a very slight examination of the subject, I found he had that species of small-pox which used to be called christalline, and of which, on a former occasion, I expressed my doubts whether they contained the slough.* But my mortification was not to end here. Dr. Hooper had other subjects for my inquiry, and my confidence was not lessened by the recent event. However, disappointment still pursued me. Though the bottoms of the foveoli were sloughy, I could not take up with the forceps any thing that resembled a piece of soaked paper. I have since tried it in other instances, but have been equally disappointed; insomuch that, had I not been able to produce such a number of witnesses, or had the discovery commenced with myself, I might have been induced to doubt the conviction of my own senses. As it is, I thought it my duty to be thus early in correcting my own errors, and to remind all the profession that there are still minutiæ in small-pox not perfectly understood. The discovery of the cow-pox has done much toward an accurate inquiry on these subjects, and will ultimately, no doubt, render all inquiries of the kind superfluous. But I hope, in the mean while, your readers will be diligent in marking, not only general appearances in eruptions, but in dissecting them, and recording with their description a minute history of the symptoms in their order.

Your's, &c.

JOSEPH ADAMS.

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* See Journal, vol. ix. p. 312.

OBSERVATIONS *on* CHOREA SANCTI VITI; *with a new Theory of the Disease: by* JOHN REDMAN COXE, M. D. *of Philadelphia.*

JOHN MAGNUS, aged forty, a taylor by profession, of a full habit and sanguine temperament, about June, 1801, began first to complain of irregular or convulsive motions of the head, mouth and hands. It appears that he has, for a long time previous to this, had irregular motions of his hands and head, which gave him no concern. About two years ago he laboured under syphilis. At his first application for assistance he was advised to abstain from liquor, to take regular exercise both morning and evening, and to avoid costiveness, and sitting up so late at night to work as usual. This advice he neglected; and in about two weeks fever supervened, with great costiveness, which was removed by Glauber's salts, and the occasional use of aloetic pills. His complaints augmented, and in about a fortnight more he began to complain of stupor and giddiness of the head. His pulse was frequent and quick, but not full. He was bled to fourteen ounces, and took senna, manna, &c. The giddiness still continued, and pain began again to recur in a few days, with almost constant coma and stupor. He was again bled, and purged with jalap and calomel. Stramonium, boiled in vinegar, was ordered, to bathe his head, and poultices of the same were applied to his feet every night, which appeared to relieve him much. The good effects gradually subsided, and its further use was omitted.

Previously to the last bleeding, in July, he complained much of weakness of the eyes, attended with a dull pain and slight inflammation. A wash of sugar of lead and white vitriol was prescribed, and six leeches to the temples, which all died soon after sucking. A soreness of the nose and throat rendering it probable that his syphilitic complaint had not been completely cured, he was put, for a short time, on the use of the opium and calomel pills.

As each bleeding appeared to weaken him, leaving him more stupid for upwards of a day, the lancet was employed more cautiously. All this time his appetite was remarkably good, and so continued till near the close of his illness. He still grew worse, and an involuntary discharge of urine took place. The stupor appearing considerable, and his pulse being fuller, with skin hot and

bloated face, and irregular motions continuing, he was bled to eighteen ounces, after which he seemed much weaker the first day, but less stupid. He took nitrous powders for about a week, but seemed no better, except in an abatement of his fever. His pulse became weaker, but not less frequent. He now took valerian in ʒß. doses, and gradually increased it to ʒi. thrice a day. This continued for a week, gave no relief, and it was then combined with snake-root eight or nine days longer, with little effect; during which period he was blistered three or four times. He now began to complain of increase of pain in his head and back, and repeated the antimonial powders.

The above account I received from the apothecary of the Dispensary, who, at this period, requested me to visit him. I recommended the continuance of the antimonial powders, with the addition of small doses of camphor, and applied cups to the temples, neck, and adjacent parts, and a large blister to the head. The preceding blisters were dressed with mercurial ointment, which was likewise employed in friction. His mouth became sore, and slight salivation ensued.

After pursuing the above plan for some time, it was discontinued, and columbo, rust of iron, and rhubarb, were given for some days with no beneficial effect. The blisters were repeated.

On the 14th of September the leading symptoms were increased; pulse quicker; skin hot. Ordered to lose fourteen ounces of blood in the afternoon. In the evening very feeble, with increased flow of urine. He appeared somewhat better the 15th. As he was costive, the laxative ingredients were ordered, and he was blistered behind the ears. In the evening he seemed better, with moist skin, weak pulse, and continued increase of urine. The nitrous powders were continued. He was slightly delirious on the 18th; pulse fuller and irregular. The powders were continued. On the 19th, pulse regular but feeble; continue powders, and give a tonic medicine of bark, Port wine, and laudanum. In consequence of the increase of febrile symptoms, he soon after lost eighteen ounces of blood. The medicines were continued till the 28th of November. From the recommendation of the Medical Repository, Hex. I. vol. v. p. 95, as extracted from Hufeland's Journal, I began the use of phosphorus in the following manner, after he had for a week omitted all his medicines.

October

October 4th. ℞. Phosphori grs. ij. laudani gtt. xl. white sugar ʒij. gum arab. ℈i. Rub them well together in a glass mortar, and add tr. of cinnamon ℥i. water, &c. Make ℥. viij. Of this he was directed to take a table-spoonful every hour. He began it in the evening.

5th. Symptoms continue; no apparent effect from the medicine.

6th. Pulse generally from 80 to 100; symptoms as yesterday. Bowels open; appetite good; has taken about one grain of phosphorus in the last twenty-four hours; repeat it to two grains in twenty-four hours.

7th. Convulsive motions apparently less; seems languid; pulse only 56; eyes look natural.

8th. Pulse 60; appetite, if any thing, greater than usual; symptoms as above: continue the phosphorus to two and a half grains in twenty-four hours.

9th. Low and languid through the day; no medicine taken of the last increased quantity. He fainted this morning; and walked across the room with difficulty, supported. Towards night-fall was attacked with a violent vomiting, continuing a considerable time; for which his wife gave him sixteen drops of laudanum. This was vomited, but it then ceased, and he slept a little, with much rambling. No stool since yesterday morning. Towards midnight vomiting returned, with considerable dyspnœa, and much apparent debility.

Ordered, early on the morning of the 10th, a mixture of bark, wine and laudanum. At nine A. M. I found his breathing stertorous; no stool; vomiting stopped, but appearing to suffer in his stomach, which, as we understood, pained him. Pulse tremulous, and scarce perceptible at the wrist, but more full and slow above the elbow; feet cold to the ancles; the arms also are cold, owing, in part, probably, to his frequently exposing them from beneath the bed-clothes. Considering him now, as I should have done before, had I comprehended the theory of chorea, as labouring under a depressed state of the system, I tried to bleed him, but could not obtain more than two or three tea-spoonfuls of blood, which appeared to me to be in a dissolved state. I therefore ordered him an emetic of twenty grains of white vitriol, and four of tartar emetic, dissolved in half a pint of water, to take a table-spoonful every ten minutes, till it should operate, in order to relieve the stomach, if any thing he had taken had affected him. One half was ineffectually taken, when I ordered a double dose of castor-oil without effect. At noon he continued the same. Pulse imperceptible at the wrist, and

no vein visible to try venesection. Ordered senna and manna a. ℥ i. rhubarb ʒß. Infuse in a pint of boiling water, and give a large tea-cupful every hour, as also a powerful purgative enema every hour. Cataplasms to the feet, and bleed if possible. Six o'clock P. M. Medicines all taken, and six enemas, without effect. Some wind was discharged. Ordered calomel ℈i. gamboge grs. x. in a dose of Castor oil, immediately, and repeat the oil every hour if necessary. Boil up the former ingredients with a pint of water, and add Glauber's salts ℥j. and use for the glyster, instead of common water, with two table-spoonfuls each of salt and molasses. Apply a blister to the stomach; pulse imperceptible; no pain of the head apparently; pupils natural; convulsions diminished; breathing the same, and very slow; much rambling, with slight intervals of reason. About nine P. M. he died.

Dissection.

October 11th, eleven o'clock.—The body, on inspection, had no symptoms of emaciation; and accordingly, on cutting the teguments, we found the fat on the abdomen not less than one inch thick, and in some parts considerably more. The omentum and mesentery were uncommonly loaded with the adipose matter. Stomach and intestines much distended with flatus. Stomach, internally, slightly inflamed, which I was rather disposed to consider as the effect of the gastric fluid after death, as no disposition to vomit had existed for more than twenty-four hours preceding his death, which would scarcely have been the case had the inflammation existed before that event. Kidnies, spleen, pancreas, and gall-bladder, perfectly sound. The liver was enlarged, and cut as if slightly schirrous; and its external appearance much resembled Castile soap, with small streaks and obscure white. The urinary bladder was healthy, though contracted, owing to his long incontinence of urine, originating, doubtless, in the affection of the brain, hereafter to be noticed.

The thoracic viscera were sound, the lungs adhering partially to the surrounding pleura. The fat in great abundance around the basis of the heart, and no unusual proportion of fluid in the pericardium.

On separating the scalp the vessels bled very much, and much blood oozed from the small vessels passing from the pericranium to the bones of the head. After raising the cranium, the vessels were turgid with blood, the small ones bleeding freely when ruptured from the bone. Several

veral portions of coagulable lymph were found in the longitudinal sinus, and the extremities of the large vessels emptying into it. Great inflammation was apparent, the whole length of the sinus, on its edges, where it touches the hemispheres of the brain, extending itself on the surface of the pia mater, and about the blood-vessels. Firm adhesions existed between the dura and pia mater at this part, by considerable portions of perfectly organic coagulable lynph, most evident about the coronal suture.

On cutting into the substance of the brain, the blood oozed from every extremity of the divided vessels; and, from the number, I concluded that many now conveyed red blood, which, in health, admitted a pellucid lymph alone. On cutting cautiously down, I completely separated it, for some length, from the thin transparent pia mater, which lines the ventricles, and which was here greatly distended by at least twelve ounces of a very transparent fluid.

The various communications between the ventricles were here most beautifully exhibited, especially the foramen ovale uniting the two lateral ventricles, which was here large enough to admit, with ease, the extremity of the little finger. The blood-vessels of the cerebellum were equally turgid. The optic nerves appeared sound. The dissection occupied above two hours.

Observations.

As I did not see this patient for nearly three months from his attack, I can say nothing of his case, except from the report of the person attending, which is fully detailed. I had little suspicion at first of water in the brain, as he complained of very little pain in it at any period after I saw him; neither was it accompanied with strabismus, or dilated pupil. He experienced none of those changes in the pulse peculiar to hydrocephalus, its uniform state being from 70 or 80 to 100, except after the use of the phosphorus, when it fell to 56. At the time, I supposed it owing to the medicine, and probably it was so, by exciting an increased determination of blood to the brain, and thus inducing apoplexy, or acute hydrocephalus. From the time I saw him he was affected with fatuity, and towards the close of the disease he seemed to have indistinct vision. Till within about ten days of his death, he could distinguish the hour of th day in a watch at least six feet dsstant from him. He saw double occasionally about two days before his death. His appetite was

always good, and even voracious, and I never could restrain it till within two days of his exit. He always asserted his head was well, and complained only of great debility. His pulse never beat very hard (or rather it was depressed), and the blood was sizy and cup-shaped. He lost altogether about an hundred ounces of blood, which gave relief, though drawn in quantities of eighteen and twenty ounces at a time. Blisters to the head, neck, ears, and wrists, and kept running for a considerable time, gave no ease; and though under the influence of mercury for nearly six weeks, during three of which he spat considerably, with sore gums and loose teeth, yet it gave no respite. Nitrous powders every two hours, so as to induce nausea and vomiting, did not affect his complaint, either for better or worse. His bowels were mostly laxative. Digestion went on well, as the immense quantity of fat evinced; and but a small portion of fœcal matter was found in the alimentary canal.

The water must have been accumulated a considerable time, as evinced by the quantity, and the very enlarged state of the foramen ovale. Its sudden effussion must have produced apoplexy; but the slow progress of the effusion permitted the brain to accommodate itself to the pressure, by the action of its absorbents upon the substance of the brain itself, and serves to evince the power of the system to resist a morbid impression, when slowly applied.

The water in the brain was not, I believe, the immediate cause of death. Some sudden effusion or congestion was the source of the fatal issue, by producing apoplexy. The turgid state of the blood-vessels would seem to favour this opinion. Whether the phosphorus induced this I cannot say. He took about four grains in all. I have supposed it was the source of the event which took place, and have never since used it.

Had I viewed the disease in the light I now do, I should have depended on copious evacuations from the bowels and blood-vessels, with blisters; but I confess I was in a great measure in the dark as to the cause of his illness.

The case which I have thus faithfully detailed, led me to think more seriously on the subject of the chorea than I had before done, and convinced me it ought not to be viewed in the light of an idiopathic disease. A case, hereafter detailed, which very lately came under my care, has added strength to the opinion I entertain; and a very interesting one, related by Dr. Paterson, in his " Letters concerning

concerning the internal Dropsy of the Brain," has served but to confirm it in my mind.

The Chorea Sancti Viti is, as I hope to prove, merely a symptomatic affection of a disease which, though long known, has not, I think, been thoroughly understood till of late years: I mean Hydrocephalus Internus. That the chorea has never been properly elucidated, is, I think, apparent, from the numerous opinions which have been entertained respecting it. Some have considered it as of the epileptic kind; some of the paralytic; and others of both. It has been viewed as a disease of the muscles, considered as a branch of the nervous system. It has been regarded as similar to the disease produced by the bite of a tarantula, and it has also been ascribed to witchcraft. By all it has been passed over so cursorily that little is to be gained, even of the facts connected with its history. Even Sydenham, who has, perhaps, given us the best description of the disease, scarcely adverts to any thing but its curious gesticulations.

However numerous may be the *remote* causes of a disease, the *proximate* must necessarily be uniform; and of the proximate cause of chorea I cannot trace the slightest suspicion in authors. Dr. Patterson, in his treatise above alluded to, has come so nigh as to place the cause for the effect, as he considers chorea the original disease, and attempts to explain the manner in which convulsive affections produce watery effusions in the brain; a fact he affirms to be sufficiently attested by dissection. I shall hereafter give a short view of the case he details, as far as it may serve to substantiate my opinion, and proceed in my attempt to develope the pathology of the disease, by proving that it arises *solely* as a symptom of the *chronic* state of hydrocephalus internus.

In general, we know hydrocephalus to be a disease rapid in its termination. It certainly, however, exists frequently as a chronic affection, as numerous dissections of Bonetus, Morgagni, and others, testify. When it comes on thus slowly, it permits the brain to accommodate itself to the pressure of the fluid in the ventricles, doubtless by a portion of its substance being taken up by the absorbents, without producing its direful symptoms in their full extent; but inducing various grades of apoplexy, epilepsy, palsy, and occasionally of this curious affection, chorea.

Hydrocephalus generally attacks children; so does chorea; and both occasionally occur in adults. The symptom of strabismus does not invariably take place in hydroce-

 phalus;

phalus; and though mostly absent, yet it sometimes occurs in chorea. The cause in both must be the same.

Hydrocephalus sometimes follows inflammatory fever, where the head has been much affected; so does chorea; and both sometimes occur from blows on the head.

A too rapid growth of the body in early life may, by the determination to the brain, excite hydrocephalus; and chorea sometimes appears to depend on the same remote cause for its production.

A sudden check to accustomed secretions, such as discharges from the ears, &c. sometimes appears the remote cause of both diseases.

Habit, doubtless, may keep up this curious affection long after the original cause is removed. Hence also frights are said to produce its recurrence, of which De Haen furnishes us with an example, after a lapse of more than two years. We are told, however, by Sydenham, that those once affected with it are apt to have it recur. I should, therefore, rather ascribe it to a renewed affusion, by a sudden determination to a weak part. Chorea is not, in general, noticed till some time has elapsed. It is, however, probable that, could it be attended to from its earliest attack, we should observe many obscure symptoms of water in the brain. Aphonia, idiocy, &c. are not uncommon from hydrocephalus; and they also occur in the higher grades of chorea. The muscles of the face are affected in both diseases, producing spasmus, cynicus, risus sardonicus, &c.

Girls are said to be more frequently affected with chorea than boys. Is this really the case, or is it merely accidental? And how is the fact as it respects hydrocephalus?

Some have supposed this disease to depend on worms, and hydrocephalus has been also ascribed to them. The symptoms of worms are so numerous, according to many authors, that, like some other complaints, they are seen lurking in every disease. For my part, I confess I think them a very harmless and highly persecuted part of the creation. We find them uninjurious in many healthy children. Few, perhaps, pass the stages of infancy and childhood without them. If they exist in great abundance, I can suppose them very prejudicial; and perhaps they are likewise detrimental when disturbed themselves by some febrile commotion in the system, which they may then augment, but certainly did not produce. For how is it possible that such violent symptoms should suddenly arise from the presence of one, two, or even a dozen

of

of these creatures; and yet, during the progress of their growth, nothing of the sort take place? Should not the symptoms exist proportioned to their increase? The remedies which have been effectual in removing some diseases, having produced the evacuation of any worms in the alimentary canal, have been falsely supposed to have cured by their removal. How rarely do we find many of these creatures evacuated by the various anthelmintics employed for their removal; and how often do we find the symptoms ascribed to worms vanish, after the operation of the medicine given, without the evacuation of a single one! I shall not digress further here on the almost universal quackery in families on this subject, though much might be said. I will only add, that I fear many children are carried off by dropsy in the brain, whilst the anxious parents are trying every remedy, public and private, to remove worms, which exist only in their own brains.

If hydrocephalus is the cause of chorea, it may be asked, as the former is not an unfrequent disease, why the latter does not more often occur? I cannot pretend to resolve the question; but may ask, why the apoplexy, epilepsy, palsy, &c. are not always produced? We know too little of the nervous system to reason accurately upon it; yet I feel persuaded of the truth of the above principles, although I cannot, perhaps, agree conclusively upon them.

It may be asked, also, why chorea is not, in general, a fatal disease, if it arises from dropsy of the brain? This, I think, can only be explained upon the principles of habit; the slow deposition of the fluid in the ventricles allowing the brain to accommodate itself to the burden. When death occurs in chorea, it seems to me probable that it arises from some sudden increased determination to the vessels of the brain, producing either a kind of acute hydrocephalus, or an engorgement of the vessels themselves; in either case inducing apoplexy. It is to be observed that, although the brain was habituated to a certain degree of distention, yet any *sudden* addition to that must act precisely as if such habit had never been acquired.

Man is not the only animal subject to chorea, as may be readily supposed. I find, however, no notice taken of its occurrence in any other animal by those authors I have perused. I have been lately informed by a lady, that she knew a whole litter of pigs suffer under the disease till they were upwards of three months old. And I have

have now in my possession a dog, of the coach-house breed, whose left fore leg and side, together with the left side of his face, have been greatly affected with it ever since an attack of the distemper in the last autumn. He was much benefited by two or three active mercurial purgatives; and at the time of my writing this, he is almost well.

This leads me to say, that I think the analogy of diseases in man and beasts are not sufficiently attended to. This disease (the distemper) has many symptoms, as well as the staggers or convulsions of horses, in common with hydrocephalus. In my opinion (without the certainty of demonstration by dissection) they are all the same disease. Taplin, who has written upon the various diseases incident to that noble quadruped the horse, has not thought it beneath his notice to treat of the distemper of dogs, and has, doubtless, rendered the disease less formidable by his judicious treatment. He considers the complaint, however, as affecting particularly the throat, stomach, and intestines. I regret, however, his neglect to ascertain this important point by dissection, especially as the disease, before his observations on it, was generally viewed as seated in the head. I have never yet had an opportunity of verifying or rejecting my opinion by dissection since I first entertained it. There are, however, several circumstances mentioned by him in favour of my ideas.

The disease appears at a period of life in some measure analogous to that period in which hydrocephalus most usually occurs in the human subject; but the cause he mentions would be likely to occur at any period, and even to be frequently repeated; whereas the animal seldom suffers from a second attack. I cannot easily explain, upon either opinion, why it more frequently, and with greater violence, attacks the females than the males. The debility, in the latter stage of the complaint, of the hinder parts, amounting nearly to paralysis, and the frequent twitchings and convulsive spasms, appear to me more nearly connected with effusion in the ventricles of the brain than with the violent obstruction of the stomach or some part of the intestines. The obstruction he speaks of, I apprehend, may be viewed more as a remote than a proximate cause; whilst his powerful cathartics, combined with tartar emetic, &c. appear to favour the absorption of fluid in the ventricles of the brain. The rapidity of the cure will not be considered extraordinary, when we

we recollect the speedy discussion of distant tumours, sometimes by the operation of an emetic: and the smallest portion of fluid re-absorbed would be sufficient to diminish the immediate danger. After all, this disease can be understood with certainty only by dissection, which I ardently anticipate: viewing it, however, as distantly related to the subject before us, I thought the digression might be serviceable to a very useful class of animals.

In confirmation of the chronic state of hydrocephalus being the probable cause of chorea, I shall refer to Willis, in his Treatise on Convulsive Diseases, where are detailed several interesting cases of convulsions of the muscles, &c. for several years; dissection after death shewing the brain to be filled with water, which had doubtless produced and continued the disease.

The motions in chorea cease during sleep, with, perhaps, few exceptions. In the last case I saw, the eyelids continued partially open, and the eyes rolled considerably.

The will, I doubt not, has some effect on the disease, as the motion is occasionally restrained by fear. Cullen talks of its having been epidemic in some part of Scotland. If so, I think it must have been partly owing to an imitative propensity, as in the epilepsy, related by Kaauw Boerhaave.

I cannot explain why the disease should be sometimes partial, sometimes universal; nor why, according to De Haen, of ten cases he saw, nine should be of the left side. Partial pressure, may, perhaps, explain the former: the latter I should presume to be merely accidental.

This disease differs from tetanus (independently of its cause), in as much as the flexors and extensors of the limb, or antagonist muscles, are in a constant and rapid succession, though unequal motion; whilst in tetanus one or other set generally predominates, or else both act with equal force. On this account it is, that it is usually not a painful disease, as no one muscle contacts so long as to cause pain by so permanent a state. And from this rapid *unequal* motion of each antagonist it probably is that such strange contortions are made, preventing a cup, &c. from being brought in a direct line to the mouth.

Hysteria is sometimes combined with chorea, as in the case hereafter mentioned, as is also catalepsy.

Are not the convulsions of acute hydrocephalus analogous to chorea in the chronic?

Sauvages, in his Nosologia Methodica, in speaking of this disease under the name of Scelotyrbe, or Dance de St. Guy,

St. Guy, mentions one species of it as intermitting. (Vol I. p. 592.)

In the cure of this disease, De Haen speaks highly of electricity, though more, I think, than it deserves. Rotheram, in his Notes on Cullen's First Lines, mentions a case in which it was serviceable. Much of its utility probably depends on the period of its application.

Camphor has been employed in this disease. A case is given in one of Duncan's Medical Commentaries, in which it was employed for three months. The tonic plan has failed at first, probably from being used too soon, or when depletion was necessary. Though the credit of the cure, in this case, is given to the camphor, I must confess I think it as likely to have been effected by the gradual tone acquired by the system from other sources.

The reason why the remedies in general use (tonics) are, for the most part, successful, is, I imagine, that we are called in at that period when absorption is most readily excited by the general tone they give the system. In the early stages it often requires bleeding and purging, as was Sydenham's method; and which, with little addition, is the best mode of removing hydrocephalus. Sydenham has laid it down as an universal measure to bleed; but this must depend on the state of the system as indicated by the pulse. If it is active, bleeding is certainly proper; after which I shall pursue a mercurial course, and follow it up with tonics, as bark, columbo, steel, elixir of vitriol, port wine, and the cold bath.

I shall now give a brief statement of the case related by Dr. Patterson, at page 58 and seq. of his treatise.—In this case, a girl of nine years of age, a frequent and tormenting head-ach of some years continuance, accompanied with severe stomach sickness, had preceded the Doctor's first visit on the 3d of April, 1790, for chorea, which had been discovered a few weeks preceding, especially of the *left* side. The *head was now free from pain*; pulse slow and small; eyes *regular* and *sound*; bowels costive; and coldness and impaired use of the *left* arm. On the 22d she had a slight head-ach, for the fourth time since her illness. Under the use of tonics of various kinds, and electricity, the chorea appeared to mend during the month of May. But on the 13th of June she again complained of the violent head-ach and sick stomach; for which, on the fourth day of its attack, a vomit was administered, with little benefit; some involuntary motion of the *right* hand, and vision less distinct, &c. On the 18th her head

was

was so bad that she took a second emetic, with some relief; but she was as bad the following morning, continuing to the 22d. Her eyes were proper. The *convulsions had gone*, and she had *regained the perfect use of her hands.* A blister relieved the head-ach; but a paralytic stroke followed in the course of the day; the mouth being distorted, and the *right* arm having lost its use. On the 25th, *Strabismus* towards the left side; *dilated* pupils; insensible to light; *convulsively* affected in the *left* side; *torpid* in the *right*. On the 26th the left arm was more convulsed, the right remaining torpid; at midnight general convulsions recurring, of various degrees. At two o'clock she died.

On being examined, the blood-vessels of the dura mater were turgid and reddish, exhibiting appearances of strong preceding inflammation. A kind of serous diffusion existed over the circumvolutions of the lobes; the left lateral portion of the plexus choroides was inflamed; and two ounces of water were found in the left ventricle, and half that quantity in the right.

In this interesting case, which is fully detailed by Dr. Patterson, I feel no doubt of the long continued and violent head-achs being owing to the fluid in the ventricles of the brain. The alternation of the head-achs with chorea, show strongly the connection of the two diseases; whilst the paralysis of the *right* arm, and the convulsions of the *left*, show the connection of chorea and palsy. The operation of the emetics probably hastened her dissolution, by determining too forcibly the circulation of the brain, and hence exciting an acute state of hydrocephalus.

It appears to me that Dr. Patterson has greatly erred in supposing chorea the primary disease; of which each must judge for himself.—I shall now beg leave to relate a case of chorea which has lately come under my care, and then dismiss the subject.

December 15th, 1803.—Rosetta, aged nine years, a mulatto child, hitherto perfectly healthy, but very mischievous, for which she had repeatedly suffered from blows, &c. When an infant, she lost, by an accident, all the toes of the right foot except the great toe. About six weeks ago she began to be affected with those convulsive motions of the right arm and foot, which have since so much increased. They were at first thought to be owing to mischief, as she let every thing fall she took in her right hand, which was, till within a few days past, the part principally

principally affected. Her face and tongue at length partook of the complaint, and she now talks but little; though at times she screams out greatly, yet without complaining of any pain. Her tongue is white, and pulse active, though not very quick. The eyes are not affected, and she sleeps sound, without any of those convulsions which affect her during the day. I ordered her ten grains of calomel at bed time, and a scruple of rhubarb in the morning—to lose eight ounces of blood, and to be put on low diet. The medicine operated well, and blood was natural. Her left side became now greatly affected. Pulse is moderate. I therefore prescribed, on the 17th, fifteen grains of bark, and ten of rust of iron, three times a day, with a grain of opium night and morning. The symptoms still increasing, I omitted the bark and steel, and on the 21st put her on a mercurial course by friction, with antimonial powders (composed of two grains of nitre, two of calomel, and one fourth of a grain of tartar emetic) every two hours. She complains of pain on the left side of her head since yesterday, for which I blistered her behind the ears. I learnt to-day that she had been frequently employed by a gentleman, whom I had had under my care in the same house, to rub in mercurial ointment upon his legs, which she did with her bare hands, and continually was dabbling in cold water. Quere, its effects upon her? She has hitherto been under little controul; yet I found I could readily intimidate her, which now became absolutely necessary, as whenever she was in the least displeased, she screamed and roared so as to alarm the neighbourhood. On the 26th her mouth became very sore, from the medicine, which was consequently suspended: but as she had frequent hysteric paroxysms of laughing and crying, I used assafœtida in small doses. The great source of uneasiness to her, and which evidently made her worse, is an impression, which she and the neighbours gave way to, that she is bewitched by an old woman who lives near her, and is very ill, and whom she thinks she sees every night. By threatening to apply a blister if she continued to see the old woman, under the plea of its being a strong proof of her disease being worse, I in some measure destroyed her foolish apprehensions; but the death of the old woman, about the beginning of the year, did more for me than all my threats; for she never saw her afterwards. Little was done for her at this time, except giving gentle doses of physic, as her teeth were very loose, and the spitting continued. On the 2d of January, 1804, I began the

use

use of tonics; columbo-root and steel a. ʒij. made into twelve doses; one three times a day; and on the 7th increased the steel to ʒiij. all with evident good effect. I have omitted to mention the motion of her eyes during sleep, although the convulsions of her head, &c. were totally suspended. She was now able to walk much more steadily, and mended daily. On the 11th, in addition to the powders, I ordered the shower-bath, with the happiest results. At this time I was struck, in her walking, with a kind of cataleptic affection—a sudden and involuntary stopping for nearly half a minute at a time, when she would again resume her walk. By the 23d she was nearly well; scarce a vestige of the disease remained; and her fatuity and idiotic appearance seemed quite gone; a few slight twitches of her fingers alone remaining, as if from habit merely. The cold bath for about a week longer completed her recovery.

March 20, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the numerous communications constantly inserted in your very useful Journal on Vaccination, I have been much surprised that no gentleman hath yet noticed those excellent Observations of Dr. Jenner on Herpetic Eruptions, published in your Journal of August last. Before I had read that valuable letter, I had long observed the often imperfect progress of the cow-pock pustule, in patients who had any irritative eruptive complaint. I not only found more difficulty in communicating the disease, but I had always been more or less dissatisfied with its influence on the system, as well as to external appearance. I am now convinced, that more real imperfect cases of vaccination hath occurred from this source, than any other; therefore medical gentlemen ought to be particularly cautious in minutely examining, before inoculation, whether their patients are free from all species of herpes, or itch; the latter, as well as the former, often impede the cow-pock pustule from proceeding regularly. Scrophula, on the contrary, seems to have no such effect. I have lately vaccinated a child, who had several large scrophulous ulcers,

ers, yet passed thro' the disease properly and regularly; the wounds are now healed, and the child's general health appears much improved. Dr. Wood, in his History of Vaccination at Newcastle, in your last Journal, quotes Mr. Fife, respecting some slight eruptions about a child's ear; but he is totally silent on those sterling instructions, as well as observations, given us by Dr. Jenner, whom the world may still look up to for further information on this interesting subject. I can add but little weight to such authority. I shall only select one case, among many others, which I had a fair opportunity of witnessing. Mr. F's two children were inoculated with fresh vaccine fluid, on the 5th of October last; the youngest, ten months old, a fine healthy child, went through the disease regularly; the eldest, two years and a half, had been subject to a violent herpetic eruption, since he was four months old. His arm on the second day appeared much inflamed; on the third and fourth, the inflammation was so vivid, that I pronounced the pustule to be irregular; from those days to the twelfth every appearance, both as to efflorescence and scabbing, were incomplete. The child continued for a month pretty free from eruptions, during which time I again attempted to vaccinate him; but he became so cross and turbulent that I was obliged to desist. I conceive this child certainly liable to variolous infection at any future period, unless he is more perfectly vaccinated.* The above case strikingly confirms the effect of irritative eruptions, in preventing perfect vaccination; both children were inoculated at the same time, with the same fluid; one had herpes, the other none; one passed the disease regularly, the other did not.

With begging medical men to pay more particular attention to this subject,

I am, &c.

W. CLEMENT.

Shrewsbury, March 12, 1805.

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* What were the causes that frequently prevented variolous infection from taking place after repeated inoculations? Were they eruptions or some constitutional idiosyncrasy? Were those cases in Fullwood's Rents, and some others we have heard of, free from all cuticular eruption during vaccination?

To

To the Editors of the Medical and Phyſical Journal.

GENTLEMEN,

ON the 1st of this month I vaccinated with the same fluid the two children of a Mr. S. who lives at No. 78, in Pembroke-street, in this town; the eldest is three years old, the youngest eight months: the former has a fair complexion and light hair, and has always been healthy. The vaccinated parts on both arms of this child having taken on a pustulous character, and terminated in ugly yellowish waxy looking scabs, surrounded with an angry fretful redness, I was led very minutely to examine the whole surface of this child's skin. I discovered eight or ten large, foul, nasty blotches, two or three of which were nearly as broad as the nail of my fore finger, and certainly more resembled those we now and then meet with in cases of inveterate or ill cured psora than any other I can refer them to. The scabs of some had fallen off, and the surfaces of these were now scaly. Under one axilla, an excoriated and diffused eruption was much more like the usual appearance of recent scabies on that part. On further inquiry, I found that this child had been more or less subject to blotches of this description from its birth. It may not, perhaps, be out of place to mention, that the father of this child suffered formerly, and not long since, much from the scrophula, under the observation of a very respectable surgeon in this town. The mother is free of every cutaneous disease, and apparently one of the healthiest women in the world. The vesicle on the youngest child's arm (this child has no cutaneous affection) has been correctly expressed, and is now, the thirteenth day, going on to the characteristic black, horny scab.

The preceding case strikingly accords with Dr. Jenner's assertion, that some cutaneous affections now and then suspend or interrupt the regular impression of the vaccine principle. Doctors Remmett and May, Messrs. Little, Dunsterville, Smith, Penkivil, and Bone, did me the favour to visit this child. These gentlemen have, from this case, expressed themselves perfectly convinced of the truth and accuracy of Dr. Jenner's observation. This is not a case of *that incomplete vaccination which I have lately elsewhere*

adverted to:—No; in this case there scarcely seems to have been any thing of vaccination; yet would this, from the extent of local affection, &c. in an early period of the practice, have imposed on some. How strongly this case teaches us to see repeatedly, at different periods, the subjects of vaccination. Having, I sincerely hope, done for ever with the small-pox, I am precluded from making an experiment with it on this subject. I have, no doubt, however, that I should equally fail in any attempts to produce a genuine variola on this child during the continuance of this affection on its skin, as I have in my endeavours with the vaccine principle to effect a genuine vaccina. But this analogous inference, as it is open to cavil, will be violently borne down by those persons who *take every thing but give nothing*; by those who, although the Ars Medica, in a general point of view, is confessedly the Ars Conjecturalis, attempt to strangle in birth every conjecture which is forcibly, strikingly, and rationally favourable to the interests of vaccination, and at once quash it as inadmissable in the discussion; at the same time they are insisting on, with every prolixity of detail, a string of greater rhapsodies and more extravagant flights, than were ever till now brought forward on this or any other subject:—in other words, by those who strain at a gnat and swallow a camel. Under such auspices, neither will the liberal science of medicine, nor any other, be expected to make many advances; indeed, his imperantibus, even another Galeleo might tremble for his fate. We shall not in the West Country, however, be soon laughed or frightened out of the little sense we have been blessed with. If this discussion must assume a character of warfare, let the contest be purely English; let it be manly, open, and generous; let us have nothing of assassination in it. I purpose, bye and bye, to give the subject of this case the hydrargyrus cum sulphure; to anoint him with the sulphur ointment; and, if I succeed in removing the disease on his skin, to re-vaccinate him under the observation of the same gentlemen I have mentioned above.

I am, &c.

Plymouth Dock, Mar. 13, 1805. RICHARD DUNNING.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

WHILE Vaccination, in this its native kingdom, is principally promoted by a few humble and obscure individuals, it is more justly appreciated in other countries. In France, it is cultivated with unremitting ardor; and all the energies of Government are called forth in support of the practice.

Its propagation is there encouraged by something more than barren patronage, and empty names. It is there considered as a national concern. The Minister of the Interior has instituted a Society for the Extermination of the Small-pox, over which he himself presides; and under his auspices, upwards of sixty thousand human beings have been secured from the ravages of the small-pox, within the space of three months.

I here subjoin a translation of the Plan of that Society; and cannot conclude without declaring, that I would rather be Chaptal at the head of his benevolent Institution, than Bonaparte in all his glory.

I am, &c.

New Street, Hanover Square. JOHN RING.

"MINISTER OF THE INTERIOR.

"Society for the Extermination of the Small-pox in France, "by Means of Vaccination.

"Letter of the Minister to the Prefects.

"*Paris*, 14 *Germinal, An.* 12.

"I invited you, Citizen Prefect, by my circular letter of last Prairial, to promote by all the means in your power Vaccine Inoculation; the immense advantages of which, for the increase of population, and the welfare of mankind, are so completely demonstrated.

"The Prefects in many departments are already impressed with a zeal worthy of the highest eulogiums, to fulfil in this respect the paternal views of Government; by establishing Committees of Vaccination, and organising the practice of this salutary art, in the different districts submitted to their care. It is to second their generous efforts, to strengthen them, and to regulate them by a ge-

 neral

neral impulse, that I again call your attention to this important subject.

"The Central Committee of Vaccination, whose report has reflected so much light upon that novel species of practice, have expressed a wish, that a new society for propagating vaccine inoculation should be established; for the purpose of accomplishing the extermination of the small-pox in France,—an object of the highest concern; the practicability of which, already self-evident, was, thanks to their zeal, still farther confirmed by striking examples, and undeniable proofs. I am anxious to gratify this wish, which had been equally expressed by the National Institute. Men distinguished by their rank and talents have united themselves; forming a new society, the plan of which I now address to you. Of this society, the actual Members of the Central Committee of Vaccination, from their experience, and their devotion to the cause, ought to constitute a part. I now invite you to share their labours, and to second their exertions.

"It belongs more particularly to the Prefects, to extend through the departments the measures which the society has adopted; to the execution of which I am ready to dedicate all my attention.

"The advantages of vaccine inoculation are so obvious, and so easily attained, that the most certain method of making them known is, to enable every class of citizens to estimate their just value. It is, in fact, the peculiar nature of this discovery, to work its own way, and to propagate itself readily by the evidence of its utility, and of the benefits it confers. Being exempt from every kind of inconvenience, and, when once performed, not subjecting the patient to any expense, we are naturally prejudiced in favor of the practice; while the epidemic small-pox, so frequently recurring, and sparing, in the most populous neighbourhoods, when it rages in all its fury, those who have been inoculated with the cow-pock, offers a satisfactory demonstration of its efficacy to every observer.

"It is necessary to apply ourselves particularly to this practice, in order to give it new life; and to multiply, under the immediate inspection of the people, the opportunities of judging of its advantage. By recommending it to the institutors of lyceums, the managers of religious establishments, the proprietors of manufactories, and the governors of workhouses, who employ a great number of children, you will set our cities a salutary example.

"The children who are supported by the state, when vaccinated,

vaccinated, and sent into the country, will also serve to make known the advantages of the new inoculation; unless, through the confidence of certain families in the skill of the faculty, or the zeal and good sense of some of the more intelligent inhabitants, it is already propagated there.

"The establishment of midwives, who are educated in the hospitals of Paris, in different parts of the country, the Juries of Medicine, and the sisters of charity, dispersed through the several communes, will prove still more the means of propagating the knowledge and practice of vaccination among the people. But above all, we must exert our utmost endeavours, to enlighten the public opinion; for which purpose, all the facts, and all the results of experiments, should be carefully collected. The most striking instances of preservation, observed during the epidemic small-pox, should be published; and if errors present themselves, or ignorance presume to make false allegations, the former should be carefully corrected, the latter speedily and forcibly refuted. A great number of results would contribute to fix the public opinion.

"The natural effect of propagating vaccination must be, to render the small-pox more and more rare. By keeping an annual register of the continual decrease of the number attacked with that disease, and of the proportion of its victims in our Bills of Mortality, we shall produce general conviction; and no cause will any longer retard the adoption of a practice, which is known to be the source of so great a benefit.

"This is the object we have in view; and, in order to attain it, we must dispute every inch of ground with the enemy, whom we wish to exterminate, by a wise combination of efforts; and by an union of measures which embrace every part of France. It appears to me necessary, that the example already set by some Prefects, should be followed by all; and that the course they pursue, is calculated to obtain uniform evidence upon every point, and unquestionable results from every quarter.

"This end will be accomplished, by establishing in every department a Committee of Vaccination, composed of the most intelligent medical practitioners, and associating with them citizens distinguished by their rank, fortune, and character. The ministers of the Gospel will be useful in these associations, on account of their influence. Many examples have taught us what services they may render on this occasion.

 "We

"We must commit to the disposal of every committee, in the towns where they are formed, one of the halls of the most frequented religious houses; with all the means necessary for constantly keeping up the practice of vaccination. In the towns of a sub-prefecture, committees of districts should be established, to correspond with the committee of the department; or we may supply the want of this measure, by appointing one or two of the most intelligent physicians, who shall be associated with the committee of the department.

"In order to extend vaccination through the country, one or two officers of health, in each canton, should be charged by the Prefect to vaccinate the poor gratuitously; or, if circumstances require it, the Prefect should appoint Professors of the art, who shall be directed to propagate inoculation through the country, at stated times. Such resources should be combined as situations admit, and opportunities offer; and those should be preferred, which promise the greatest advantage.

"The instructions and advice which may be deemed necessary, and the supplies of vaccine matter, shall be procured from the Committee of the Society; who shall answer every demand without delay.

"The Prefects shall address to me, every month, the result of the measures they adopt; and inform me of such medical practitioners, and zealous citizens, as shall distinguish themselves by their success, and their devotion to this cause; they shall also send to the society the observations they collect. I recommend to their attention the arrangement of the tables, a model of which is annexed. They will take care to send me two copies.

"Such are the means, Citizen Prefect, which I have thought it my duty to propose; the success of which, in my opinion, will be the more certain, in proportion as they approach to the plan adopted by the society. No object calls more loudly for your attention; it is one of the dearest interests of the state, and a certain mode of augmenting our population. By employing all the means in your power to enlighten the public opinion, by exciting the solicitude of families, and removing those obstacles, which the fear of a trifling expense too often opposes to the greatest benefit, you will manifest to all the citizens, even in the lowest ranks of society, the advantage of the new practice, which secures their preservation.

"On my part I will second your efforts, I will support you with all the power of Government; and, confident of your

your zeal, and that of the Society which devotes itself to the accomplishment of this good work in which we are all engaged, I doubt not but we shall, in a few years, annihilate the small-pox in France, as we have already annihilated the leprosy, and many other calamities of this kind; of which no traces are to be found, but in obscure or insulated cantons, or in the page of history.

"I have the honour to be, &c.

"CHAPTAL."

"*The Plan of the Society for the Extermination of the Small-pox in France, by Means of Vaccination.*

"The numerous experiments instituted in France, during the space of four years, prove, in the most incontestible manner, that the cow-pock is a security against the small-pox, by a process as certain in its effects, as it is mild and simple in its operation. Its success is established by more than a hundred thousand facts, verified by the Central Committee.

"During the four years that this Committee have pursued, with no less zeal than impartiality, the progress of vaccination, not a single fact has occurred that could shake the public confidence. It has been proved, that all which has been written to the contrary, has been the result of ignorance or of falsehood.

"We are now endeavouring to employ the means of diffusing the benefits of this salutary practice; and, by bringing it, as we hope, into general use, utterly to banish the small-pox. Such is the object of this new society forming in Paris, under the auspices of the Minister of the Interior; and which, already fortified by all the means Government can submit to its disposal, wishes to unite and concentrate every kind of knowledge, talent, reputation, and authority, in one point. The annexed ordinance of the Minister of the Interior, will explain the plan and organisation of the society.

"The extreme importance of this design, and the incalculable advantage which will result from its execution, leave no room to doubt, that every citizen, and every friend of humanity and of his country, will applaud the undertaking; and be eager to share our labours. Innumerable facts have demonstrated, that vaccination shields those who have submitted to it from the attack of the small-pox; and in the mean time, it is ascertained by proofs equally incontestible, that by multiplying it as oc-

casion requires, we may banish that contagion from the most populous neighbourhood; and even from the precincts of a town or a city. Hospitals containing a thousand children, or more, have been thus preserved from an epidemic small-pox, by vaccinating those who had not undergone the disease. In some districts, where the epidemic small-pox had appeared, it was confined to, and extinguished in, the house where it first broke out, by vaccinating all the infants in the neighbourhood.

"To conclude, we have seen the infection, when spread over a large tract of country, arrested in its course at the gates of cities, where the inhabitants in general had been inoculated with the cow-pock. These memorable occurrences give us room to hope, that by propagating vaccination in every direction, and rendering the practice general, we may accomplish the extermination of the small-pox in France. This is the final object of our endeavours, the practicability of which is evident; and if we all cordially and strenuously unite in its execution, the French nation will set a great and glorious example to the world.

"*The Ordinance of the Minister of the Interior, concerning the Formation of a Central Society of Vaccination.*

"The Minister of the Interior, considering that the advantages of Vaccination have been sufficiently ascertained, by the numerous experiments made, or collected, by the Central Committee established at Paris, and by the National Institute; that this method, already practised with success in almost every part of France, only requires a regular and uniform mode of propagation, in order to obtain every degree of extension of which it is susceptible, has issued the following decree.

"1. There shall be at Paris, near the Minister of the Interior, a Central Society of Vaccination, of which the Minister shall be President.

"2. The Members of the Society are,

Delaplace, Chancellor of the Senate.
Lacepede, Grand Chancellor of the Legion of Honour.
Fontanes, President of the Legislative Corps.
Portalis, Fourcroy, Regnault (de S. Jean d'Angely) } Counsellors of State.
Bertholet, Senator.
La Rochefoucault Liancourt.
Corvisart, Physician of Government.
Coulomb, Secretary Gen. of the Minister of the Interior.

Thouret,

Thouret, Director of the School of Medicine.
J. J. Leroux, Professor of the School of Medicine.
Mongenot, Jadelot, } Physicians of the Hospital des Enfans.
Marin, Surgeon of the Lyceum.
Doussin Dubreuil, Guillotin, Salmade, Delaroche, } Doctors of Physic.
Parfait, } Member of the Central Bureau of Admission to the Hospitals.
Husson, Physician of the Hospital of Vaccination.
Hallé, Huzard, Tessier, Cuvier, Delambre, Parmentier, Pinel, Degerando, } Members of the National Institute.
Duquesnoy, Delessert, } Membs. of the Council Gen. of Hospitals.
Delasteyrie.
Coste, Physician of Invalids.
Barbier Neuville, } Chief of Division to the Minister of the Interior.

" 3. There shall be formed in the bosom of the Society, a Committee, consisting of sixteen Members, and the Secretary of the Society.

" 4. The Members of the Committee are Citizens Thouret, Corvisart, Pinel, Leroux, Hallé, Huzard, Guillotin, Salmade, Parfait, Delaroche, Marin, Jadelot, Delasteyrie, Doussin Dubreuil, Mongenot, and Husson.

" 5. The Secretary of the Society shall also be that of the Committee. The Minister appoints Cit. Husson to this situation.

" 6. The Prefects of the departments shall maintain a regular correspondence upon all subjects relative to vaccination, and to epidemic and epizootic small-pox; two copies of which shall be transmitted to the Minister; one for himself, and the other for the Society. The Prefects who shall be at Paris upon leave, may assist at the sittings of the Society.

" 7. Instructions shall be sent to the Prefects, with which they shall be requested to conform, as far as their situation will permit. The plans they have already adopted, for

for propagating vaccination in their departments, shall be transmitted to the Minister, in order that, if necessary, and after the opinion of their Society has been taken, they may be sanctioned with his approbation.

"8. An annual report shall be made to the Society, at its public meeting, upon the labours undertaken in France for propagating vaccination; and upon the registers that shall be sent by the departments.

"9. Testimonials shall be granted, and rewards given, to those persons who have displayed the greatest zeal in propagating vaccination.

"This arret is dated the 14th of Germinal, and the 12th year of the Republic; and signed Chaptal, Minister of the Interior."

"*Regulations adopted by the Minister of the Interior, for the Committee of the Central Society of Vaccination.*

"1. The meetings of the Committee formed in the bosom of the Society, shall be held every Friday; and last from three to five hours.

"2. The Committee shall meet oftener, if necessary, on receiving notice from the President of the Society.

"3. The Committee shall correspond with the Prefects of Departments; and render an account every week to the Minister, and every month to the Society, of the facts relative to vaccination, which are contained in that correspondence.

"4. The President of the Committee is to be chosen by ballot, and by a majority of votes. He shall continue in office six months.

"5. The Secretary is to have the charge of all correspondence that is carried on in the name of the Committee, to take copies of the registers sent by the Prefects; to answer every thing relative to the science, and to send out supplies of cow-pock matter. He is to present, at every meeting of the Committee, a report of the labours of the week, to keep the minutes, to draw up the verbal process, and attend without delay to all letters and memoirs. He is to be the organ between the Committee and the Minister.

"6. The Secretary shall also answer all questions on the part of the administration of the Committees of the departments; but the answers on this subject shall be submitted to the General Meeting of the Society; and signed, if

if possible, by the Minister, who is President of the Society.

"7. There shall be a General Meeting of the Society every month, in which the Secretary shall make a report upon the whole correspondence, the progress of the new practice, the improvements that may be expected, and the rewards that are to be conferred.

"I hereby certify, that this is a faithful copy of the original, entered in the verbal process of the meeting held by the Minister of the Interior, at Paris, on the 18th of Germinal, and the 12th year.

"HUSSON, Secretary.

"N.B. The correspondence, and applications for cow-pock matter, are to be addressed under cover to the Minister of the Interior, 'Au Cit. Husson, Docteur en Medicine, rue et école de Medicine, Paris."

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE discovery, which, as was observed by an intelligent Greek in Egypt, is 'the glory of your isle!' has now made its way through the greater part of the globe; Vacciolation is every where triumphant; the author has had honours showered down upon him by a wondering and grateful world. But, amid the numerous encomiums which have reached your Journal from every quarter, I think ye have not yet been enabled to exhibit a more honourable testimonial than what I have the satisfaction of now presenting to you.

It was handed to me this evening by the Dr. Beku, on his route to Edinburgh, in order to be forwarded to the Discoverer; but as it was our opinion that so signal a mark of approbation should not be locked up from the public by the delicacy of the gentleman to whom it is addressed; I intreat you to publish the whole of this highly flattering Diploma.

The French letter, which accompanied it, I have taken the liberty of translating, and hope you will deem it worthy of the perusal of your Readers.

Your's, respectfully,

Salisbury Square, 16, iv, 1805. JOHN WALKER.

"To Dr. JENNER,

"*Honourary Member of the Imperial University of Wilna.*

"Sir,

"The Imperial University of Wilna, filled with a profound sentiment of esteem for the immortal Jenner, who has given us the Vaccine, of which the beneficent practice is already spread over the whole surface of the globe, unanimously did itself the gratification of conferring on you, in its sitting of the 13th of November last, the title of Honourary Member. It is with a satisfaction very grateful to me, Sir, that I take the earliest opportunity of communicating the information to you, and of sending you your Diploma.

The Imperial University of Wilna ventures to hope that you will deign to honour it with your correspondence, from which it cannot but promise itself the greatest advantage.

"I have the honour to be, with sentiments of high consideration, "Sir,

"Your very humble and obedient servant,

"J. Stroynowski,

"Bishop Rector of the University of Wilna."

Wilna, January 13, 1805.

"P.S. I have the honour, Sir, to recommend to your friendship, Counsellor Beku,* a Professor of our University, who will have the satisfaction to remit to you this letter and your diploma."

"Jussu Augustissimi Imperatoris et Authocratoris Totius Rossiae,

"ALEXANDRI I.

"Domini nostri Clementissimi.

"Hyeronymus Stroynowski de Strzemién Nominatus Episcopus Coadjutor Luccoriensis et Zytomiriensis, Praelatus Scholasticus Cathedralis Vilnensis, Eques Ordinis Sancti Stanislai, Theologiae et Juris Utriusque Doctor, Membrum Academiae Scientiarum Florentiae, Academiae Arcadum Romae, Coetus Literarii Varsaviae, et Imperatoriae Societatis Œconomicae Petropoli, Imperatoriae Universitatis

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* Dr. Beku, Counsellor of His Imperial and Russian Majesty, is Professor of Physiology in the University of Wilna. Ed.

versitatis Vilnensis Rector Magnificus una cum Senatu Academico.

"Cum nuper in consessu literario Vir insigni eruditione et scientia, multisque laboribus conspicuus, accuratissimisque ad tuendam valetudinem praeceptis et observationibus, publicam in lucem editis, potissimum vero perquam nobilis ac primarius et classicus Vaccinae auctor audiat, quo quidem salutaris remedii genere multa mortalium millia praesentissimae morti eripuerit erepturusque sit, non solum de re literaria ac medica, sed de universo genere humano optime meritus Edwardus Jenner, Medicinae Doctor unanimi omnium Professorum sententia, in socium Imperatoriae Universitatis Vilnensis sit cooptatus; nos proinde pro munere nostro Eundem Clarissimum et Doctissimum Virum, omnibus juribus ac praerogativis, quae juxta leges Universitatis nostrae, honorificae huic associationi tribuuntur, gaudere testamur. In quorum fidem Diploma hocce manu nostra subscriptum Sigillo Universitatis muniri jussimus. Datum Vilnae in Œdibus Universitatis. XVI. Calendas Decembris, MDCCCIV. anni.

"Hyeronymus Stroynowski.

"Josephus Michiewiez, Decanus Professorum Ordinis Scientiarum Physicarum et Mathemat. Canonicus Cathedralis Samogitiensis. mpp.

"Simon Malewski, Juris Nat. et Gen. Professor Consiliarius Aul. Secr. Imper. Univer. Vil."

To the Editors of the Medical and Physical Journal.

Gentlemen,

Of all the gratifications to the human heart, that of flattery, when not administered *ad nauseam*, is one of the most delicious, and a large dose of it will often be received without any symptom of nausea being produced. How have I seen a whole bar stretch out their necks, on the learned judge making some trifling remark! If not nauseated by their yawning ears he must have felt himself an oracle. How unceremoniously ye have brought forward John Ring's singular case of malformation of the heart; while contemporary journalists (Med. and Chirurg. Rev. July, 1803) speaking of a morbid heart, 'hope to be rather commended

commended than blamed for raising the expectation of the public to receive the history of the case from the able practitioner, who alone can give it accurately!' Why did you not do your 'Constant Correspondent' the credit of mentioning, since he has been silent on it himself, that he had given his prognosis to professional men as well as to the mother? I know not whether I am likely to offend or to please him, in offering some further observations on his very curious case.

From the appearances on dissection, he says, it is not surprising that the infant did not survive the period (one year) of her life; 'it is rather a wonder that she lived so long.' It is a wonder, I grant, that she lived so long; indeed, with me, there is cause of astonishment in her living *ex utero* at all. Why did she not expire at the time of the birth, immediately on ceasing to derive sanguification (oxygenation) from the placenta? and why, having survived a few respirations, did she not go on to experience, by some spontaneous effort of nature, an accommodation of the whole system to the condition of the amphibia? I say by some spontaneous effort, because we do not recognise in this very extraordinary case of malformation, a condition of thoracic viscera that would sustain the life even of a cold blooded animal;* nor in fact, does it seem to me possible to conceive in what way the effects of the confusion of parts could be obviated by any, the most extra-

* Amphibia and fishes, different from mammalia and birds, are said to have only one ventricle and one auricle for the circulation of their comparatively cold blood. But the heart of some of the amphibia seems to be so constructed as to act as a single heart, when the animal is under water, though in the air it may be capable of effecting the long circulation.

"In a water tortoise, (says Cheselden in his Anatomy of the Human Body, book iv. near the end of chap. iii.) which I had an opportunity of examining with that most dexterous and indefatigable anatomist Dr. Douglas, I found the two ventricles of the heart but half divided by a septum, and in the beginning of the pulmonary artery, several strong muscular rings, a little distant from each other; each of which, by contracting, would be capable of resisting a part of that blood, which otherwise would have been thrown into the lungs, when they were under water; and this blood, so obstructed, must necessarily be thrown into the aorta, the two ventricles being in a manner one common cavity; and when they are out of the water, this communication of ventricles will suffer but little confusion of the blood which flows into the ventricles, because each ventricle receiving and discharging the same quantity of blood, at the same time, they will balance each other, and thereby such a mixture will be very much prevented."

extraordinary, efforts of nature. To both auricles of the heart, blood arives from the general system. The inferior cava pours its blood to the left side; there are two superior cavæ, and one of these pours its blood also to the left; the other, in the usual way, to the right. Here then are two currents of carbonated blood arriving at the left side of the heart, while only one arrives at the right, from which the pulmonary artery, very small, carries blood to the lungs, whence it makes its way to the left side. The description (page 121) shews that this last little renovated stream was liable to be mixed with the carbonated mass through all the cavities of the heart. Well might the complexion in some parts be of a lead colour; in others of a bluish purple. I am astonished that the child survived even an hour, the great change from the fœtal to the breathing state. Does not the case afford a proof that the animal is most tenacious of life in the early stages of its existence, when the important organs of brain, heart, liver, &c. are of the largest size, in proportion with other parts, particularly the parts of voluntary motion?

In the Blue Boy, in Sandifort's Collection, and in other similar cases where the subjects have even lived to approach puberty, direct communication, by an aperture, between the ventricles, has been discovered by dissection. This well explains the possibility, though not the necessity of unoxygenated blood getting into the aorta. From Cheselden's Observations on the Tortoise, I naturally enough suppose that the imperfection in the septum would not necessarily produce the morbid effect; that the septum might even be completed after birth; or, that the superior force of the left ventricle preventing this, and thus having the opportunity of acting, though the aperture, on the pulmonary system might even enlarge it, and keeping some part of the blood performing a short circulation through the lungs, hyperoxygenate the stream before its getting into the aorta, and thus produce the florid instead of the livid complexion. These considerations induce me to believe, — that the common case of malformation of the heart, in which the aorta arises from both ventricles, a deficiency in the septumof the ventricles being also found at the part where the aorta arises,– that this case of aperture, or deficiency, in the septum of the ventricles, must have arisen from a morbid state of the pulmonary vessels, a want of capacity in them to transmit the whole vital stream; and that hence unoxygenated blood has been forced through the septum, and hence must continue to be propelled through the general system by the contraction of the

the left as well as of the right ventricle. The charming description of the structure of the healthy heart, and of the most curiously mechanical part of its physiology, if it may be so deemed, by Everard Home, does much increase my astonishment and surprise at the human subject's continuing to live under any, the least, irregularity in the structure of this vital organ. Your contemporaries promising themselves so much gratification 'from the present knowledge of the action of air (oxygen) in the lungs, on the thousand questions occurring to a well informed and inquisitive mind,' does not excite in me any ardent hopes of complete information. Indeed, if the blood were only sent to the lungs for the purpose of being fanned or cooled by the inspired air, or for the purpose of having a hot and noxious vapour carried off from it, all the motions of the heart would be as necessary for the preservation of the animal as they are at present. Respiration would be the same.

Your's, respectfully,

Salisbury Square, 17, iv. 1805. JOHN WALKER.

An Account of Success attending the Use of Medicines, prepared from the Humulus Lupulus, Lin.; by Mr. A. Freake, *Apothecary of Tottenham Court Road.*

PREVIOUSLY to presenting the public with the following account, it may be necessary to state those reasons which first induced me to make trial of the Lupulus, which had for so long a time been neglected, as a medicine; and I shall briefly state what led me to it.

In the beginning of 1801, I was applied to by a gentleman going abroad, to make some bitter tincture to take with him, in order that he might occasionally use a little of it diluted to strengthen his stomach, which rejected the bark in every form, and most of the bitters that had been prescribed for him. Among the numerous experiments I had made with herbs and flowers of the bitter class, as well as roots, barks, and other parts of vegetable substances, no one appeared to me so grateful as the lupulus. On mentioning that circumstance, he requested me to prepare some of the tincture, which I accordingly did; but before the process was finished the ship unexpectedly sailed, and he was obliged to go without the medicine, which may be considered as a fortunate circumstance; for, in all

all probability, I should never have thought of using it as a medicine, any more than any other medical gentleman; but having the preparation complete, after a due examination of what different authors had said respecting it, I was induced to make trial of it whenever a fair opportunity occurred, and, not without reason to hope I should succeed in some particular cases; for as some of those authors mention that the lupulus promises to be applicable to valuable purposes in medicine, so *I* thought that it might, upon the principle that it is so materially useful in our malt liquors, and having every assurance it could not injure my patients when given with care, if it did not answer my expectation of affording relief.

The lady to whom I first gave this medicine was 80 years of age, much afflicted with scorbutic humour, which had at times almost covered the body, and generally once or twice a year had erysipelatous fever, which sometimes threatened her life; these complaints had lasted more than twenty years, (though she had often been relieved with medicines prescribed by physicians, as well as by my particular efforts, which were considerable, as I respected her much as a friend, and my visits were consequently made more frequently). The habit was costive, so that scarcely three days past without having recourse to some aperient medicine; she was very restless, and opiates, while they relieved one symptom, increased the other; flying pains were frequent, which were supposed the effect of latent gout, as her family was much afflicted with it, but thought she had not strength to throw it off. To this lady, whose stomach had become weak by age, disease, &c. as no medicine in the pharmacopœia likely to relieve had been omitted; I was induced to give one drachm of the tinct. lupuli comp. formed into a draught twice a day, with the hope and intent of strengthening the stomach, and continued that dose for sixteen days; it eased the flying pains, procured rest, the stomach became stronger, and the habit less costive; I then gave her the like dose three times a day for a month, when she was better in all respects. This flattering success encouraged me to persevere. I then made pills with the pulv. lupuli, also infusion with the flowers, and gave it at times in addition to the tincture before administered, which was continued for three months, at the end of which period very trifling humour remained, no return of erysipelas occurred, and aperient medicines were no longer needful. The tincture has been continued at intervals in different

doses and no symptom of any alarming nature has returned since, nor has any other medicine been taken, (except a little antispasmodic mixture occasionally). The lady is now in her 84th year.

The success of this case induced me to make different preparations, and to select such cases as appeared most likely to be relieved. Every new experiment encouraged me to proceed, as I found it useful whenever tonic medicine could relieve; and with this manifest advantage over the bark, that it may often be used without heating the patient, when bark cannot prudently be given.

There was scarcely a person under my care with the influenza, at the beginning of 1803, but took some of the preparations before the disorder went off, for it proved an excellent tonic, and seemed to abate heat when inflammatory symptoms continued to prevail.

Several gentlemen afflicted with gout have regained strength much sooner than usual by taking some pills and draughts with a considerable proportion of that medicine in the composition. I have given it to some patients with very good effect while the swelling and inflammation existed, both which have gone off more kindly and speedily than they had usually done in other fits; in some cases the pills have relieved the symptoms that had generally preceded a fit.

A gentleman much habituated to gout (and to recover from which he was taking some of the pills) had also hydrocele. The case was seen by two surgeons, and the operation deferred for a short time; but I was agreeably surprised to find that as the gouty symptoms were going off, the swelling, which had for two years been gradually increasing, subsided of itself, and the part resumed its original size in less than two months, nor was any other medicine taken than the pills alluded to. The gentleman is now strong and healthy, and has not been laid up with gout since, though he usually had two fits in each year before.

I have administered the lupulus in different forms, (that is, in powder, tincture, pills, extract, infusion, decoction, and conserve) in a great number of cases; and although I have not kept an account, think I should be correct in stating that more than one half the number have been relieved. In no instance have I had cause to regret using the medicine, as only a slight affection of the head has occasionally happened, which did not continue long, and I do not recollect an untoward symptom to have occurred

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with any patient that took it, nor has it prevented my using other medicines as auxiliaries.

I have made a plain * tincture of the lupulus, and a compound tincture, i. e. with the addition of tinct. cardam. comp.; one drachm of the former, or two of the latter, in the form of a draught, has been the dose I have generally given once or twice a day, occasionally adding other medicines as the case might require; the extreme dose, double that quantity in the twenty-four hours.

I have also given plain and compound pills; the former composed of the extract and powder, and the latter made with the addition of pulv. rhubarb. et zingiberis; of either of these I have given two or three pills once or twice a day, and the extreme dose has been double that number in the twenty-four hours.

The beneficial effects of the lupulus appear to arise from its alterative and tonic power on the system, and by correcting acrimony, which it does in an eminent degree; it is sedative, aperient, and diuretic, and a good antiseptic and corroborant in bowel complaints. Pain has been eased and rest procured with this medicine when opium, &c. did not succeed, or could not be continued with safety.

This being the fourth year in which I have experienced the properties the lupulus possesses, I can with confidence assert, that if it does not supercede the use of many medicines hitherto very justly extolled, it will at least prove a valuable addition to the number already in use; and as it has been hinted by a medical gentleman of some notoriety, that it is not a good medicine in the gout, but, on the contrary, is one of the causes that produce it, I can only say, that should the legislature be inclined to offer a reward for the discovery of the best medicine to ease, relieve, and prevent the violent recurrence of that complaint, I should not be fearful of gaining the prize by naming the lupulus.

To the Editors of the Medical and Physical Journal.

Gentlemen,

That candour and impartiality which characterize your Journal, induce me to trouble you with a few Observations, in defence of my opinions on the Nature

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* The proportions were a pound and a half to a gallon of proof spirit.

and Treatment of Bubo, rendered necessary by some remarks in one of your Numbers and in the British Critic.

Practitioners experienced in the treatment of the venereal disease, agree that ulcerated bubo very frequently resists the treatment to which venereal ulcers in other parts as frequently yield; that the sores change their aspect from mildness to malignity, and continue spreading to a dangerous extent, under the use of mercury; that its disuse, in such cases, is attended with beneficial effects, and cures take place without it; whilst in true venereal ulcers of other parts, the reverse invariably occurs; they change from malignity to mildness, and cures are effected by it only.

Mercury, the acknowledged antidote, cures the ulcer every where but in the groin; there, in many instances, it not only does not cure, but aggravates the symptoms; this is not my experience alone. (See the pamphlet.)

Is the Medical Observer, with such facts before his eyes, heedlessly to pass them by, and reject the lessons of experience, insensible to the advantages which the science of medicine derives from a vigilant attention to diseased changes, and the great importance of detecting and marking contra-indications.

The sum of my opinions is, that as mercury is found to aggravate bubo in bad habits, and many recover from the most distressing symptoms without it; there is good reason for abstaining entirely from its use in such habits. Also, it is often doubtful whether or not bubo had a venereal origin, ulcers of the penis, phymosis, and bubo having often occurred, previous to the appearance of the venereal disease, *as noticed in the original work*, is an additional argument in favour of delaying the use of mercury.

I do not consider bubo non-syphilitic in general, nor a critical abscess, but contend that the many cases which occur of its resisting mercury, &c. furnish ground for considering it alone often an equivocal symptom; and as mercury renders it still more equivocal, its exhibition should be delayed until there was more proof that it was necessary. When bubos spread to great extent, and the health is impaired under the influence of mercury in irritable subjects, it is extremely difficult to decide what course is best to be pursued; it would be much less so, if no mercury had been used, and positive evidence existed of the case being venereal.

In my observations I suggested a rationale, which, if well founded, explains the phenomenon under discussion, and gives validity to the opinions I have advanced.

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The question naturally arises, is it possible that the virus, granting the bubo to have a venereal origin, might proceed no further than the groin? When we consider the structure of glands, it is easy to conceive that an inflamed state would at least suspend for a time the absorption; and that should that state terminate quickly in sloughing, the lymphatics would be destroyed, and in that way the virus be cut of in limine; an event which is admitted as taking place in the phagadenic chancre. Although bubo and constitutional appearances often occur together, still there is abundant evidence that it is frequently local, and to encourage the practice of delaying the use of mercury in such subjects as are known to be materially injured by it. With respect to establishing a general rule, not to give mercury in any case of bubo unaccompanied by other symptoms, I will not insist; but conceive that the peculiar circumstances attending the disease, justify a deviation from the practice ordinarily pursued. I am, &c.

Dublin, March 23, 1805. EDWARD GEOGHEGAN

On the Casualties occurring in the cooling Treatment of Gout.

To the Editors of the Medical and Physical Journal.

Gentlemen,

SINCE last I had the honour of adressing you on the subject of gout, the Medical and Physical Journal, a work as much distinguished for its impartiality in the selection of the materials from which it is composed, as it is eminently calculated for the diffusion of medical science, in all its branches, contains two interesting cases; one communicated by Messrs. Scott and Taynton, and the other by Mr. O'Neal; both of them so dehortatory from the refrigerant treatment of gout, provided *a due degree of caution* be not used in its adoption, that I cannot but feel myself strongly inclined to offer a few remarks on each of those cases. My intention principally is, to deduce from them the propriety, and even the necessity, of being guided by some *principle,* in the administration of so powerful a remedy; and besides, erecting the superstructure of any doctrine on the foundation of cases detailed by others, is the likeliest method, I conceive, of obviating every suspicion of

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being biassed in my opinion by a preconceived theory. Notwithstanding the *confidence* with which the refrigerant treatment is recommended by Dr. Kinglake, in all cases indiscriminately, the *arguments* by which he has supported his doctrine, and the *experiments* by which it is sanctioned, it is, I think, sufficiently apparent, from well-attested instances of failure, where his plan of cure has been acted upon, that his theory, in some particulars, stands in need of reconsideration; and that the practice, which, at the outset, promised such immediate and complete relief to a most excruciating malady, is, for want of such revision, in danger of falling into undeserved disrepute and consequent disuse; and for no other reason, than on account of those *frequent casualties*, which different practitioners have observed to arise from its use, and have faithfully communicated to the public. I hope he does not find a renitency in himself to consider them as *something more* than "morbid coincidencies," or "accidental occurrences," through fear of acknowledging the imperfection of his theory. As he cannot have the vanity to suppose, that his dissertation is exempt from the frailty he has in common with other men, so it would be more honourable to himself, more satisfactory to the public, and would more extensively diffuse the benefit of his discovery, if he would attempt to connect these casualties with his theory; arrange the numerous detached occurrences, to which the cooling treatment of gout has given an unexpected birth; and digest them into the body of his work. Who is likely to be so competent as himself, to elucidate this obscure subject, and to point out the particular constitutional character, where injury is to be apprehended from subjecting any part of the system to a reduced temperature? And besides, ought the public to be disappointed in their reasonable expectation, that having sanctioned, by the authority of his example and recommendation, a practice in which the welfare of thousands is involved, and defended his doctrine with a shield of science, which, however, the shaft of casualty threatens to pierce, that he would, at least, endeavour to render his pathology of the disease less vulnerable, and to place it more out of the reach of attack? Would not this be more worthy of a philosopher, than to tell us, that "he has yet to learn that the cessation of torture on the extremities," however suddenly produced by cold affusion on the affected parts (for this it must mean, if it means any thing applicable to the subject) can give rise to fatal excitement, whether inflammatory or nervous,

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on the visceral organs?" (see his remarks on Mr. O'Neal's case, in the Medical and Physical Journal); or content himself with asserting his belief, that "the colouring is highly overcharged, the morbid symptoms greatly exaggerated," (see his reply to Mr. Edlin) when similar symptoms are found, in nearly the same degree, to have arisen in other similar cases, under nearly similar circumstances, and are described by persons whom he cannot object to as prejudiced against his theory; for instance, Messrs. Scott and Taynton, and Mr. O'Neal, who, on the contrary, are avowed favourers of it?

But since this task seems, at the present moment (I hope it will not continue) to be declined by Dr. Kinglake, the remarks, which the perusal of the above-mentioned communications has occasioned me to make, are intended, in some degree, though certainly in a very inadequate one, to supply that deficiency.

Having made these preliminary observations, I proceed, without further delay, to the proper subject of this paper.

The consequences of a premature and injudicious recourse to the cooling treatment of gout have been denominated *casualties*; which, however, is an objectionable name for that effect which we have reasou to expect will ensue, and which we find does in fact ensue from a given cause. For they arise naturally, as repeated experiments have shown, from the improper, not to say empirical use, or rather abuse, of one of the greatest and most invaluable remedies in gout, when exerting its influence on fit occasions. From the censure which this remark implies, although I cannot vindicate Mr. O'Neal, it will soon be evident, that Mess. Scott and Taynton are perfectly exempted; and that their confidence in the beneficial effects of reduced temperature, when cautiously administered, has indeed rescued from the imputation of inefficiency, and of injury, this noble remedy, at a time when, from the preceding failure, it was in danger of incurring that double censure; when few, indeed, of the professed admirers of Dr. Kinglake's theory would have ventured on a repetition of the refrigerant application; but which these gentlemen, guided by the enlightened view in which they contemplated the symptoms before them, did not scruple to repeat; and the sequel of the case, which was favourable, attested and confirmed their sagacity.

The case communicated by Messrs. Scott and Taynton may seem indeed, on a superficial view, to bid defiance to any attempt at explanation, that can reconcile it to either

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the old theory of gout, or the new one of Dr. K. Upon a nearer inspection, it will be found to favour that pathology of the disease, which, I believe, is entertained by the generality of the profession; to satisfy us that gout is *not* merely a *local* malady, but a *constitutional* affection; and to confirm the propriety of a *cautious* exhibition, but by no means of the total relinquishment, of the refrigerant remedy.

In the first attack, of October 10, 1803, the propriety of a precautionary cordial medicine is very apparent; for it may well be supposed to have preserved the patient, who had just before complained of *general indisposition*, on treating the inflamed part with cold applications, from that unusual torpor which, in a subsequent attack, when the patient himself unadvisedly made a similar application without that precaution, is said to have occurred, and to have been attended with other formidable symptoms of constitutional disturbance. The next day, when the cooling application was made to the knees, *as soon as they became painful*, and, as it should seem, before inflammation was fixed on those parts, and when no precautionary medicine was exhibited internally, the head and stomach became considerably affected. But, as the whole of this attack seems to have been a very slight one, so these affections were easily removed by some stimulating medicine; and from that moment the patient gradually and speedily recovered.

The second attack, of October 1804, appears also to have been a slight one, and to have been removed without constitutional disturbance, by the refrigerant process evincing the perfect efficiency of that remedy, under judicious management. For it is to be observed, the patient himself does not appear to have ventured this time on the cooling application, till his medical advisers assented to his wishes; which, as they lived at a distance from their patient, probably allowed time for the internal viscera to recover their accustomed vigour, and, on this account, no constitutional disturbance supervened.

But in the last and principal attack, which happened about a month afterwards, we are told, *without the least delay or hesitation*, and consequently without the direction of his medical pilots, who, on former occasions, had steered him safely through the shoals and quicksands of this distemper, he plunged into water far beyond his depth, and was certainly very near *sinking*; for he was immediately seized with an "unusual torpor over the whole frame, an intens epain in the stomach, frequent vomiting, and delirium;

lirium;" and, what is truly astonishing, he continued the cold application *two hours*, with a perseverance and courage worthy of a better cause, notwithstanding the accession of those formidable symptoms. Certainly Alexander the Great, when, bathed in sweat, he plunged into the Cydnus,* must yield the palm of superior intrepidity to Mr. Mace of Chislehurst.

We find, in the course of this last attack, that the constitutional affection was as manifest, when the extremities were covered with flannel, as when the refrigerant plan was attempted. But I should only infer from this circumstance, and it is evident from the detail, that the patient was not yet recovered from the injurious effects of the two hours exposure to the refrigerant process; and it is probable, therefore, that in so strong a predisposition to torpor, a very small exposure to any other debilitating cause, not noticed, and guarded against, might have produced both the constitutional affection, and the new inflammation of the right hand, which now occurred.

There is only one more remark, suggested to me by the concluding circumstances of this case, which demand particular attention, for the proof which they afford of the *safety* and *efficacy* of the refrigerant remedy, at *a proper period* of genuine gout, as the *necessity of caution* had been clearly demonstrated, at a preceding period of the same disorder. Notwithstanding the patient had been so great a sufferer, in the former part of this attack, from his own injudicious application of a remedy which he was unable to manage and controul, yet we find that the medical attendants were not deterred by this discouraging circumstance (and surely their confidence, under the guidance of discretion, reflects on them the highest honour), in a subsequent

* It is curious to observe not only *the effects on the body*, but the *time* also, which Mr. Mace's fellow-sufferer, from the same element, chose for his celebrated plunge. *Æstas* erat, et diei *fervidissimum tempus* cæperat. Pulvere ac sudore simul perfusum regem invitavit liquor fluminis, ut *calidum adhuc corpus* ablueret. Descendit in flumen. Vixque ingressi subito horrore *artus rigere* cæperunt: *pallor* deinde suffusus est, et *totum* propemodum *corpus vitalis calor* reliquit. *Expiranti similem* ministri manu excipiunt, nec satis *compotem mentis* in tabernaculum deferunt. Quintus Curtius, lib. 3. The learned reader may remember, that the river Cydnus, which was remarkable for its coldness, is celebrated by an ancient author, I believe, Vitruvius, who flourished in the Augustan Age; for what? *for curing the gout by bathing the legs in it.* I have not, at this moment, an opportunity of consulting the original: but, in Ainsworth's Dictionary, under the proper name Cydnus, there is a reference to the passage.

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part of the same attack, when the inflammation ran high on the extremities, and when the constitutional disorder appeared to have terminated, from seizing that favourable moment, and recurring to a remedy which they knew to be the only adequate one to subdue gouty inflammation. The success was answerable to the confidence which they assumed; and exhibits the triumph of the cooling treatment of gout, when a proper degree of caution directs the application of that important remedy.

With respect to the other case, communicated by Mr. O'Neal, the *gouty* character is so strongly marked, that I think it unnecessary to attempt a refutation of the opinion, suggested by the author himself, and assented to by Dr. Kinglake, that it was, from the *commencement, an apoplectic attack.* For though gout and apoplexy have been supposed, by some authors, to be nearly allied to each other, yet their distinguishing features are so widely different, that I believe the one was never before mistaken for the other; nor apoplexy ever known to "*commence* with a torpor of the stomach, succeeded by a considerable *swelling* and *inflammation* of the foot." These particular symptoms are asserted, by Mr. O'Neal, to have characterized the *commencement* of his patient's illness; and, agreeably to the pathology which is entertained, I think, by nine-tenths of the profession, and to the description I gave of it in the 70th Number of your Journal, it is impossible for me not to recognize that distemper which is called gout.

There is reason to believe, indeed, that the *constitutional* torpor, in particular temperaments, is of so short duration, and so immediately succeeded by *topical* inflammation, as to escape the notice sometimes of the patient himself. The torpor of the case before us was of a more permanent nature; and not having been removed by the *salutary* effects on the system, which the inflammation of the foot, aided by proper medicine, or perhaps without medicine, in the space of two or three days, would probably have produced, but, as it is reasonable to suppose, *increased* and *extended* by the topical application of cold water first to the foot, then externally and internally to the region of the stomach itself, can we be surprized that the *brain* should become involved in a state of similar torpor? The pernicious influence of reduced temperature, on a habit strongly predisposed to torpor, is distinctly marked throughout the whole progress of this interesting case. An exposure to a drizzling rain all night, seems, in the first instance, to have produced a torpor on the skin, which

which sympathetically affected the stomach. Then a *natural* effort was made to remove it by topical inflammation of the foot; but this being prevented by the contrary effects of a mistaken theory, the torpor appears to have been driven from the stomach to the brain. It was still pursued, when concentrated on that important organ, with fatal perseverance in the same mistaken treatment; until, at last (what other termination could be expected?) it seems to have been extended to the only remaining vital organ, where, to *stop its motions,* or to be *torpid,* is inevitable dissolution.

Mr. O'Neal, rather unseasonably, I think, at the conclusion of such an unfortunate case, declares his resolution of *following up* the same mode of treatment, until he sees *good reason* for relinquishing it. It is natural to ask him, what better reasons does he desire, or expect to find, than the result of the experiment which he has made, and most honourably permitted to be published? But it is not necessary to pursue my comments on this Case to any greater length; and I am sorry that my argument has led me to observations, which imply so much censure on the conduct of a professional man, who, I doubt not, in all other respects, is eminently useful in the station which he fills. If the liberty which I have taken should be thought to stand in need of further apology, I might defend it by the authority of one, who, on subjects relating to Ethicks, will not be found often mistaken; and apply to this particular occasion the more general sentiment of that great moralist: "He that writes, may be considered as a kind of general challenger, whom every one has a right to attack; since he quits the common rank of life, steps forward beyond the lists, and offers his merit to the public judgment. The duty of criticism is neither to depreciate nor dignify by partial representations; but to hold out the light of reason, whatever it may discover; and to promulgate the determinations of truth, whatever she shall dictate." Rambler, 93.

The observations, to which the two preceding cases of Gout have given rise, in conjunction with my remarks in the 72d Number of your Journal, on Mr. Edlin's publication, have no other object in view than to execute, as well as I was able, this *duty of criticism.* The reader is requested to consider them as supplemental to the paper on Gout, which is published in your 70th Number; as they are a continuation of that subject, and corroborative of the theory which is there submitted to the public judgment.

ment. The inferences which, I think, are fairly deducible from the whole are the following: That the reputation of the cooling practice is yet unimpugned by the accession of the formidable symptoms of the one, or the calamitous issue of the other two cases; that in all the three instances, the harm which ensued is imputable to the *injudicious* use of that remedy; that the cooling treatment should not be hazarded, till the internal viscera have discovered indubitable signs of performing with accustomed energy their proper functions; that this will *rarely* happen till the local inflammation has existed for some hours, or two or three days, or, in some cases, even a longer period; that it will happen sooner in some patients than in others, owing perhaps to some inexplicable peculiarity of temperament, or to the means which might be employed to produce that desirable effect; that when it *does* happen, no *greater degree* of cold should be employed, nor applied over a *larger surface*, nor continued for a *longer duration*, than is sufficient to subdue the local inflammation; that with these necessary precautions, no *casualty*, or *accidental occurrence*, or *morbid coincidence*, (unphilosophical terms, declarative of our ignorance) need in general to be apprehended; that if, notwithstanding every conceivable precaution, as the *stomach* in particular seems to retain a strong predisposition to torpor, owing perhaps to the want of *habit* in the new motions of health and energy, symptoms of constitutional disturbance should discover themselves,—the refrigerant application must be immediately removed, and the torpor relieved by suitable stimulants; but that, in such a case, *after sufficient delay*, the local inflammation, if it should return, is to be encountered with a repetition of the cooling process; and a happy termination be confidently anticipated.

If these conclusions are legitimately deduced, allow me to express an anxious hope that the time is not very remote, when the practice of cold affusion in Gout will be universally adopted by *discriminating* practitioners; and that unfounded prejudices will vanish before the accumulated evidence of the advantages arising from its *judicious* administration.

I am, &c.

JAMES MANTAL.

Bromley High Elms, March 28, 1805.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ON the 26th of August, 1804, about eight o'clock in the evening, whilst the Honourable East India Company's ship Northampton, was lying at anchor in the harbour of Coringa, on the Coromandel coast, a lad about twelve years of age, with a large wound in the head, (caused by a marlin spike * falling out of the fore-top upon his head) was brought on board for assistance by the chief-mate of a country ship, they having no surgeon on board.

On clearing away the blood and shaving his head, I perceived a large wound on the right side and towards the vertex near the posterior and superior angle of the parietal bone, part of which was laid bare; it extended forward about four inches in length, parallel with the sagittal suture. As the *mental faculties* of the boy were *not at all impaired*, I did not at first conceive that any fracture had taken place, more particularly as the bone appeared perfectly smooth and without fissure when laid bare; but on lifting up the scalp and examining further, I found I was mistaken in my conjecture. I immediately dilated the wound, and discovered that the parietal bone was *fractured and depressed*, at least three inches in length, and three-quarters of an inch in breadth near the posterior and superior angle, and passing forwards nearly in the direction of the wound. I immediately applied the trephine, and raised the depressed part; no effusion had taken place; the scalp was laid down, dressed with mild digestive, and the dressings secured by a bandage and a cotton night cap.

The patient (I was informed by the officer who brought him) appeared rather convulsed as he came in the boat; but when brought on board the ship he had no symptoms of them; on the contrary, he was perfectly sensible, and answered any questions that were put to him, and continued so during the whole time of the operation. During the first night after the operation he appeared rather delirious for a short time once or twice, and had some slight febrile symptoms, and the four or five succeeding nights had a slight return of fever without delirium; after which he had no complaint except a slight head-ach now and then until the completion of the cure, Oct. 15.

When

* An iron instrument about seven or eight pounds weight.

When we read the various and contradictory symptoms enumerated by authors, of compression of the brain from external violence, and of concussion, the younger practitioner is in some measure at a loss on whom to depend for a guide, when a case comes under his own immediate care. The symptoms of concussion and compression are by most authors said to be totally distinct, while others assert there is no difference; to me the almost *only* difference appears to be, the *time* at which the alarming symptoms follow the accident.

Now in the preceding case, not one of the symptoms generally enumerated, viz. stupor, loss of sense and voluntary motion, dilated pupil, &c. were present, although the depressed part of the bone was pressing firmly on the dura mater; and had there been no external wound, it might have been difficult to have ascertained the existence of a fracture; in which case the patient would have been freely bled, had purgative medicines given him, and he would have been supposed to be doing well, until, in a short time, all the alarming symptoms would have shown themselves; violent inflammation would in all probability have taken place in the membranes of the brain, which might have terminated fatally, more particularly when the nature of the climate is considered, where, from the excessive heat, determination to the head is easily induced; and when once this action takes place, is not so easily removed as in our own climate.

Perhaps it may be deemed unwarrantable by some to have applied the trephine so soon, without the existence of any alarming symptoms; but I would ask, if it was not to be presumed they would shortly have taken place, if the piece of bone causing the compression had not been elevated? It is well known the existence of a fissure is not of itself a sufficient reason for trepanning, unless attended with alarming symptoms indicating extravasation or effusion; but when, as in this case, added to the fracture, a considerable portion of the skull is depressed, very few I imagine, would hesitate as to the means to be pursued for the relief of the patient. Yet I do not mean to say, I would apply the trephine in all cases of fracture to prevent inflammation taking place; that were I think unwarrantable; although advised by Mr. Pott; but I would ask how the removal of a piece of skull (unless pressing on the brain) can prevent inflammation? it would rather accelerate than retard that action.

I have related the preceding case merely to prove that we are not always to look for particular symptoms in these cases,

cases, and consequently that alarming fractures with compression may take place, and not be characterized by the particular symptoms generally enumerated.

I am, &c.

March 13, 1805. EDWARD PITT.

On Muriat and Tartrit of Antimony: communicated by Mr. Stott, *Surgeon, of Dumfries.*

[Continued from Vol. xi. pp. 497—505.]

I Shall now give an account of some trials I made, with the view of improving the methods of preparing muriat of antimony, and which the great importance of the subject induced me to make. After reading Mr. Scheele's valuable essay on manganese, and observing that in a mixture of manganese, muriat of soda, diluted sulphuric acid and gold, it was found that gold was taken up in solution, I never doubted of success in distilling muriat of antimony in the same way. More confident of success than I ought to have been, I put into a large retort two pounds of muriat of soda, two pounds of black manganese, one pound two ounces of sulphurated antimony, and poured upon them one pound of sulphuric acid previously diluted in one pound and a half of water. The whole being well agitated, and the vessel set on warm sand, an effervescence commenced, with a strong suffocating smell of oxygenated muriatic acid. The retort was placed for distillation, and a receiver applied, luted with flour paste. From mid day the distillation was continued till nine o'clock in the afternoon, and during most of that time an effervescence went on with the oppressive smell of oxygenated muriatic acid, which penetrated through the lute. About that time the mixture was distilled to dryness, and the retort cracked; and on lifting it out of the furnace, I run considerable risk, as the fumes issued out very copiously, and were intolerable to the lungs. Two pounds of fluid had distilled over into the receiver, of a light yellow or greenish tinge, and smelt strongly of oxygenated muriatic acid. It effervesced strongly with alkalies, fixed and volatile, but which, however, precipitated nothing from it; of course, not a particle of oxydised antimony had been carried up by it.

Next day I set about examining the residue of my experiment,

periment, and found a hard solid mass, of a grey colour, full of little crystals, and so firm that it required repeated strokes of a hammer to break it. Three ounces of this mass was pounded and put into a mattrass, one pound of water added, and a digesting heat applied. In order to be certain whether any of the antimony were so much oxydized as to constitute muriat of antimony, I put two ounces of muriat of soda into this solution, and one ounce of sulphuric acid diluted, and continued the digestion for several hours. The solution, which was now yellow, was filtered through paper into a jug, and largely diluted with boiling water; but still not a particle of pulvis algerothi was precipitated. Alkali of potash was next added, when a brisk effervescence was excited; but after this ceased, on continuing to add, a white precipitate was thrown down, which seemed to agree with what Mr. Scheele calls phlogisticated manganese, as it turned black when roasted with a red heat on an iron plate. The insoluble matter on the bottom of the mattras was partly antimony, little or nothing changed, and partly a grey powder.

In order, if possible, to obtain muriat of antimony by manganese and muriatic acid, I took one ounce of the mass first above mentioned, one ounce of powdered manganese, and one ounce of muriat of soda, and set them to digest with half an ounce of sulphuric acid. Having digested this mixture during three days, I saw no more appearance of solution than at first, as it had the same black colour; and allowed to settle, the solution was yellowish, and not milky, like muriat of antimony viâ humidâ. I therefore boiled the mixture to dryness, and towards the end, when the last of muriatic acid went off, a little whitish substance covered the inside of the upper part of the vessel, and seemed to be a little phlogisticated manganese carried up by the muriatic acid; it was in very small quantity.

In my next essay I mixed two ounces of sulphurated antimony and four ounces of sulphuric acid, and boiled to dryness, and at last gave a pretty strong heat till yellow sulphur appeared at the mouth of the vessel. The mass was now of a dirty white colour, and somewhat black at top. The vapours were exceedingly offensive. The sulphat of antimony weighed about two ounces and a half. It was quite dry and friable. It was pounded and mixed with two ounces of muriat of soda and put into a retort. Heat was next applied to this mass, which looked blue like quicksilver, and its corrosive muriat rubbed together with the view of distilling muriat of antimony from it. At first

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a dewy vapour rather whitish rose, and then a milky substance distilled into the receiver, and some of it lay along the under side of the stem of the retort, but afterwards an ochry matter rose and dirtied the white matter, and then a clear liquor dropped into the receiver. What remained on the neck of the retort was soft, but did not liquefy by heat; and when scraped out, and water dropped on it, looked like a paste of chalk and water. The clear fluid in the receiver poured off from the white matter, and boiling water added to it, became milky, or as it were curdled; but diluting largely, the whole fluid and soft matter grew a little reddish like Kermes mineral. Having washed and dried the precipitate and other matter distilled over, it weighed one drachm and two scruples. Again I deflagrated four ounces of sulphurated antimony with six ounces of nitrat of potash in a hot crucible, and when cold pounded it. Now it weighed seven ounces. It was rubbed with four ounces of sulphat of iron and four ounces of muriat of soda into an ochry coloured mass. I put it into a retort and distilled off about three ounces of a clear fluid of a pungent disagreeable smell. An ochry matter had also come over and covered about half of the inside of the receiver, and stuck to it so as not to be washed off with water. The fluid I found to be mere phlegm void of taste, and giving no precipitate with water or alkalies. The retort was found cracked into many pieces, and the residue in it was now partly a fused salt, very hard as if vitrified, and under that there seemed to be fused antimony little changed. With great difficulty I pounded the whole, as it was very hard. It was of a dirty blue colour; I put it into a digester, washed it two or three times with hot water, and then added two ounces of muriat of soda and two ounces of diluted sulphuric acid, and exposed this mixture to digestion. On diluting with hot water, however, a slight milkiness was produced, but scarcely any sensible quantity of pulvis algerothi was precipitated.

The conclusion I deduce from these three experiments, which had analogy in their favour, and might have been supported by strong and plausible arguments before trial, is, that the intelligent chemist ought never to trust to reasoning alone in the business of experimental philosophy. "Hypotheses enim," says Sir Isaac Newton, "in philosophia quæ circa experimenta versatur pro nihilo sunt habendæ.

I am, &c.

ROBERT STOTT, Surgeon.

Dumfries, March 27, 1805.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

As I little imagined, several years ago, when I was attending the Anatomical and Physiological Lectures of Mr. Cline and Dr. Haighton, that I was laying thereby the foundations of Elocutionary Science, or imbibing principles that might be applied to the education of the human voice; so I can readily conceive that neither you nor your readers may be predisposed to the supposition—that the subject of this communication has any thing to do with the objects to which the Medical and Physical Journal is devoted. But impediments of speech, though originating for the most part in irregular volition, may, in some degree, be regarded as a species of disease; and it cannot be denied—that they are frequently connected (sometimes as causes and sometimes as effects) with other diseased actions of the human system. Cases, indeed, there are of this description, which come within the immediate province of the surgeon. Of this kind some have been referred to me by professional gentlemen,* while in others I have been obliged to appeal to the assistance of the operator, before the object of my instructions could be secured.† In cases, especially of defective conformation, there is assuredly much that demands the attention of the medical professor; and I should hope that the time cannot be distant when it will be thought as regular, and as honourable, for him to superintend the application of those artificial organs by which the powers of distinct and articulate utterance may be substituted for the hollow and unintelligible murmurs of a half-formed mouth, as to dictate the form and use of those mechanical implements, by which the less glorious distinctions of erect attitude, and the firm tread of human proportion, are occasionally conferred upon the miserable cripple. Even in cases where the original workmanship of Nature has not been so

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* I acknowledge with respect the honour done me in this particular, by an ingenious physician, whose name will be found in another part of this paper; and to whom I am indebted for an acquaintance with several cases which throw much light on an essential part of my theory.

† Of this description were the cases of two of those young gentlemen, whose public recitations in the Town Hall of Doncaster, have given recent demonstration of the practical utilities of my science.

so deficient, circumstances have occurred that shew how intimately connected some parts of my present pursuit are with the objects of medical science; and, within these very few weeks, during my temporary residence in the neighbourhood of Doncaster, Mr. Hill, of the Dissenting College, at Rotherham, has found himself essentially relieved from some of the inconveniences of asthma by the system of management of the breath and voice, which I dictated for his improvement in the art of reading: a circumstance, indeed, which I was prepared to expect from similar advantages I had myself derived from the judicious attention paid to me in my early years, by the tutor to whom I am indebted for the first practical rudiments of my art.

These considerations embolden me to trouble you with a formal announcement of my intention to establish, in the neighbourhood of London, a College for the Cure of all Impediments of Speech, not connected with deficiency of hearing,* whether originating in mal-conformation, in accidental injuries, in mental agitation, or imitative habit; and, also, to request your insertion of the following sketch of the physiological parts of a Course of Lectures, which it is my intention at the same time to commence in the metropolis.

As the foundations of elocutionary science are equally laid in the physiological necessities that dictate the actions of the organs of speech, and in the laws of musical inflection and proportion, with which those actions most readily conform; I find it necessary to commence my course of instruction with an inquiry into the structure and offices of

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* With cases of deafness I do not interfere; my chief dependance being upon the ear of my pupils. But I have seen instances, and collected facts enough to induce me to warn all parents not hastily to consign their children to Colleges of the Deaf and Dumb. *Temporary* deafness, and other circumstances, during the first four or five years of infancy, sometimes produce habits, which a confusion of mind and indolent despair on the part of those who have the superintendance of such children, afterwards confirm when the cause, in reality, has ceased; and if instead of applying proper provocatives to the senses for the purpose of superinducing enunciative action, the poor child is then consigned to those silent receptacles, where inertion is confirmed by the non-presentation of objects to the proper senses, the catastrophe obviously is inevitable. What could have been more injudicious than placing the poor savage of Aveyron in the College of the Deaf and Dumb? Yet, at this very instant, a fine child, physiognomically speaking, of great promise and expectation, in the City of Carlisle, rushes upon my mind, with all the boding apprehension of a similar imolation.

those organs. These I find it necessary to distribute into two distinct classes; the *vocal organs*, which are employed in the production and variation of tunable sounds, and the *enunciative*, which are employed in superadding to those sounds the characteristic discriminations of literal and verbal expression; a classification, I believe, not hitherto observed, either by elocutionists or physiologists; and which, like other classifications, may be thought to have its difficulties; since some of the organs will, perhaps, be found to act in a double capacity of modifying the *tune*, or at least the *tone* of the voice, and of ministering to literal and verbal conformation. The distinction, nevertheless, is sufficiently obvious for all the purposes of scientific and practical application; and, certainly, in the management of impediments and deficiencies of utterance, is of sufficient importance to challenge a very minute attention. I doubt, exceedingly, whether the failure of Dr. Itard, in his attempt to confer the exercise of the faculty of speech on the Savage of Aveyron, may not, in some degree, be attributed to his overlooking this essential distinction. The organs of voice seem to have been minutely examined; though of the phenomena these should exhibit, there never appears to have been any deficiency: but what attention is recorded to the excitement of the sensibilities and varieties of lingual, labial and uvulary action, upon which the formation of verbal language must depend?

To this classification, therefore, I think it necessary to pay very particular attention; and having assumed, as my simple datum, the generally received doctrine of the origin of all sounds in percussions and vibrations of the air, I proceed to a minute investigation of the anatomy of those organs which, in the human being, give the impulses, and produce the modifications of those percussions that propagate the sounds of voice. In this part of my inquiry, I have a very powerful ally in Mr. John Gough, of Kendal; whose scientific theory, as developed in several successive papers in the Manchester Memoirs, and in his correspondence with myself upon the subject (which I communicated, by his permission, to the Monthly Magazine) falls in so exactly with the views, which, without concert or knowledge of his speculations, I had previously formed, that I instantly incorporated it with my system. Emboldened by the corroboration of his experiments, which have been further confirmed by my own reiterated repetitions, and of which sensible demonstrations are usually

ally exhibited as I proceed, I endeavour not only to explain the phenomena of the variety of human voices, but to point out the means by which strength, tone, and modulation of voice may be essentially improved.

Here still my subject continues to be closely connected with Physical and Medical Science; a minute comparison of the elocutionary and the vital functions of the lungs; the requisite reception and decomposition of atmospheric air in the cells of that organ; the small portion of such air necessary for the purposes of sonorous impulse; and, above all, appeals to notorious instances of persons of the weakest and most diseased conformation attaining great command and power of voice, enabling me not only to demonstrate the importance of management and judicious tuition in these respects; but, also, the reciprocal action and re-action of vocal and constitutional improvement.

Having considered the structure and offices of the enunciative organs, in the same particular way, and demonstrated the anatomy of the elementary parts of English speech, I proceed to the primary laws of physical necessity, under which the organs act. From one simple and original principle (whose existence and operation, I trust, are sufficiently demonstrated by the series of experiments regularly exhibited) I trace the fundamental and *physical* distinctions of heavy and light syllables; and from the *unavoidable* alternations of these (or of pauses for the actions by which they should be produced) I demonstrate the formation of those simple cadences of common and triple measure, out of which arise all the beauties of rhythmus, and all the facilities of fluent and harmonious utterance. From an injudicious application of undisciplined volition to this physical action, I endeavour to account for all the gradations of harsh, ungraceful and interruptive delivery; and from inconsiderate attempts to violate this primary law, all the customary *impediments of speech.*

The practical management of these (in which consists the glory of my art) is next considered. The line of separation between organic and habitual impediment is endeavoured to be accurately marked; the distinctions of physical and moral idiotism are discussed, as far as relates to their connection with my subject; precise facts are stated (such of them as attention to the feelings of individuals will permit, with all the circumstantiality of name and place) relative to extraordinary developements and calamitous extinctions of organic capabilities; and instances are adduced of children rendered speechless by mis-manage-

 ment,

ment in their early education, and of mutes who have been brought to the full exercise of the powers of speech by the application of proper stimuli. Some of the instances thus adduced have fallen under my own observation; for others I am indebted to the communications of Mr. John Gough, Dr. James of Carlisle, and other professional and scientific characters.

The chirurgical operations by which malconformations are to be remedied, constitute another ramification of this essential branch of my subject; and the structure and application of artificial organs, whose efficacy, even in the deplorable cases of fissure of the palate and obliteration of the uvula, I trust, is sufficiently demonstrable.*

The remedy of habitual impediments involves a more complicated view of my general theory. Some of these, indeed, originate in mere anatomical position; and all of them in what may be called the want of a proper understanding between the voluntary and physical powers; but the mode of treatment is so completely implicated with the musical parts of my science, that to enter into it would be to trespass upon those limits which the nature of your publication necessarily dictates to this communication. Upon that part of the subject I shall endeavour to make interest with Mr. Tillock to give insertion to a short article in his Philosophical Magazine; and those who have any curiosity to see a brief sketch of my entire plan, will probably meet with something of that kind in the cotemporary number of the Monthly Magazine; or they may find a more ample account of it, in the introductory Discourse which

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* Of the feasibleness of this, the boldest and most difficult of all the practical applications of my science, I never myself had any kind of doubt; and the practicability of such artificial supply of the most formidable deficiency of natural organization, was, accordingly, one of the axioms I ventured to advance, at the first outset of my present lectures (between three and four years ago) when much of my subject lay yet in chaos, and many of its most essential principles were but dimly descried. But the learned and ingenious Dr. Pringle of Alnwick (to whose attentions I have many obligations to acknowledge) endeavoured to convince me, that in this respect, I carried my hypothesis to a visionary extent; and that such deficiencies were perfectly irremediable. I have since learned, that in this opinion he is completely countenanced by the first medical and anatomical characters in the metropolis. I bowed, therefore, to authority, till facts could be appealed to; and omitted, for some time, this part of my animadversions. But my visit to Birmingham presented me with the opportunity desired. Against positive demonstration, authority, however high, cannot be admitted as argument. I resume my statement, therefore, not merely as theory, but as a practical and proven fact.

which is just ready for publication. In the mean time, your insertion of the above will much oblige,

Preston, Lancashire, Your's, respectfully,
April 8, 1805. JOHN THELWALL.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

A Director of the Royal Jennerian Society has, with some surprize and concern, called on me with the Star of yesterday, in which there is a paper on a subject which the writer considers a national one; a term however, which but very feebly designates its importance, as all the world is concerned in it. Ye will at once conclude that it must be that of which the discussion 'has increased, is increasing, and ought not to be diminished, till the small-pox is exterminated from the face of the earth.' Vacciolation is the theme; and Richard Dunning, Surgeon and Secretary to the Dock Jennerian Institution, (Plymouth) the ingenious and worthy author. Of all the advocates for the New Practice he has all along been, as ye well know, one of the most ardent to

" Mark what yon father's uplift eyes bespeak,
" What livelier transports on yon mother's cheek
" Attest her joy."*

His ardour does not appear to be at all diminished, yet I fear that his notions, now committed to the wide world, may tend to diminish those parental raptures, and to lessen the confidence of the protected and their friends. That he never wished to shake their confidence, and that his own does not at all waver, is however evident, from the following unequivocal declaration. "I subscribe implicitly, at this time, a belief that the few subjects of incomplete vaccination who are liable to a secondary impression of variolous action (and the number of these who are liable, I believe, is very limited indeed) entirely possess all the exemptions and advantages attendant on favourable cases of the inoculated small-pox, exclusively of any risk of those

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* The motto happily chosen for his pamphlet, reviewed in Vol. xii. of your Journal, p. 264.

afflicting and fatal consequences which so frequently follow and attach to the latter practice.

In your Review of his valuable pamphlet, ye have spoken of pages of it being principally theoretical, and some parts perfectly hypothetical. It appears to me to contain some very correct observations as well as ingenious conjecture. In the Star, even, he does continue to 'exercise his vein' for theorizing; and amid visionary ideas, he seems also to display considerable ingenuity, though I totally differ with him in the conclusion which he forms. "From much steady observation, from an extended correspondence, and from due reflection on all the circumstances which have arisen in the course of my attentions to this branch of medicine, I am led very confidently to advance an opinion, that entire and permanent resistance to variolous contagion, obtainable by vaccination, in some constitutions, depends in a great measure, *probably wholly depends,* on preserving *a vaccine vesicle unbroken during the process,* at least on taking care that it be not opened before that stage of it, when the areola is formed in all its characters. Indeed I would be understood to say, *where there is but one vesicle,* not before that is even beginning to decline."

From the constant demands for matter, at the Central House, I am daily obliged to break down the pocks at all stages, from their first formation till they have almost acquired their full dimensions. The matter collects again, the pocks bear their characteristic form, and the parents are assured that their children are perfectly protected. But, among the letters which I have from time to time been favoured with from the Discoverer, I can lay my hands upon one which will afford a good extract to this very point.

"I destroyed the pustule completely on the eighth day, before the areola began to form, by the application of a bit of caustic; but on putting my patients to a test; one, at the expiration of a year; the other, at two years, they were found secure. Again, Is not the virus contained in separate cells like the essential oil in the rind of an orange? How then can puncturing the pustule at any period destroy its influence on the constitution. Once more, Do we not see the pustule resume its character after it has been opened on an early day and exhausted, or nearly so."

Your's, respectfully,

Salisbury Square, 16, iv, 1805. JOHN WALKER.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

A Writer in the last number of the Medical and Chirurgical Review, says, he is glad Mr. Goldson has not been deterred from prosecuting his inquiries. Yet he acknowledges, that the new evidence offered by that gentleman is neither very extensive nor important. We may therefore conclude, that the Reviewer is pleased at seeing another impotent attempt to depreciate vaccination, and augurs a new triumph to the practice.

Mr. Goldson tells us in his preface, that his *veracity* has been called in question. It was natural, therefore, to suppose, that he would have vindicated his veracity; but after a careful perusal of his work, I have not been able to discover any such vindication.

The Reviewer notices Mr. Goldson's allusion to the case in Wilderness Lane,* which, he says, I deem a spurious cow-pock. This is what I have no where asserted. I gave my opinion, that the attempt to vaccinate proved abortive; and coincided in opinion with the officers of the Vaccine Pock Institution, that the child did not go regularly thro' the cow-pock.

It is commonly allowed, that a genuine cow-pock may disappear before the proper time; and, consequently, without affecting the habit. Instances of that sort were published in this Journal by Dr. Harrison; and are analogous to cases which have occurred, of local small-pox after inoculation. This idea did not suit Mr. Goldson's purpose. He has, therefore, been guilty of misrepresentation; as in the case of Mr. Grant's child, which I stated in my answer to his first pamphlet.

Had it been a spurious pustule, he thinks I might have been able to detect it, from my intimacy with Dr. Jenner. He is fond of writing on subjects which he does not understand; it is therefore necessary to inform him, that when this case occurred, I had never received much instruction from Dr. Jenner; who had then resided but little in London, since the promulgation of his discovery.

Mr. Goldson thinks, I must have been very soon admitted to a perfect knowledge of vaccination. I do not wonder

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* See Medical and Physical Journal for February last, p. 175.

der at his deeming it an easy task to learn the practice, when he thinks, that one who knows so little of it as himself, is capable of writing on the subject.

He adverts to my offer of submitting my vaccine patients to the test; and pretends it was indiscriminate. The offer however was, as will be seen by any one who reads it, that "*if any gentleman, who has infected two, ten, or twenty of his own vaccine patients with variolous matter, will take the trouble of inoculating mine with the same, I will furnish him with at least a thousand, on whom he may exercise his skill.*" This is but a trifle, in a gentleman who has a talent for misrepresentation, like Mr. Goldson

Another article in the Review, is a critique on Dr. Moseley's publication. The Reviewer has not noticed his want of candour, in confounding the cow-pock with the murrain; but he has noticed his reflections on those who sell cow-pock matter; whom he happily describes as *milking, selling the cream,* and converting the *cow* into *a golden calf.*

In a subsequent part of the Review is, what is called a Critical Examination of Mr. Goldson's Second Pamphlet. This is ascribed to Dr. Pearson. If, however, we may judge from intrinsic evidence, it cannot be his production; but, like the publication of the Bramin in Bengal, mentioned by Mr. Shoolbred, a base forgery.

It contains, to use the elegant language of that Review, a "*senseless outcry*" against the opponents of Mr. Goldson; between whom and the author of the critique, there seems to be a considerable degree of sympathy. In short, they appear, on this occasion, to shake hands most cordially; to pay each other a vast number of compliments, and to make one common cause.

When Mr. Goldson's first pamphlet appeared, we were told in the Review, that it was not to be answered by *arguments,* but by *facts.* No argument in favour of vaccination can be drawn but from facts. Yet this "*senseless outcry*" has been resounded from the Tweed to the Delaware; Editors of Journals and Reviews have admitted the fallacy at the suggestion of its author; and been the easy dupes of that imposition.

Much paper is wasted in proving, what I long ago proved, in my Answer to Mr. Goldson, that a local variolous pustule, in those who are put to the test after vaccination, is no proof of the inefficacy of the cow-pock. It is now also shrewdly discovered, that arguments may be adduced from Mr. Goldson's own evidence against his conclusions,

clusions, without having recourse to hazardous experiments for that purpose.

We were told, indeed, in one publication, that certain gentlemen knew such experiments were perfectly safe; yet a proof of the contrary appeared in the next page. This is a very bad specimen of that "*medical logic,*" for which the said curious production is so much puffed off in the Review.

By the Edinburgh Medical and Surgical Journal it appears, that Dr. Pearson is now convinced of the propriety of putting those, whose security against the small-pox is doubtful, to the test of vaccine rather than variolous inoculation; which, as the learned editors justly observe, is on so many accounts objectionable. It must give great pleasure to every friend of humanity to hear, that those formidable enemies of children, armed with their envenomed weapons, at length sound a retreat;

> And he, who erst had made a din most,
> Now cries, the devil take the hindmost.

In a subsequent part of the Critical Examination of Mr. Goldson's Pamphlet, we are told it is important to those who have answered that gentleman, to provoke the credit of a controversy. We are not told, however, what credit can accrue from a controversy with such an author, who, even according to this very Review, taxes his reader with three shillings, and the trouble of toiling through a dull and voluminous pamphlet for the sake of information, which is "neither very extensive, nor important."

The controversy, however, it is well known, was provoked by Mr. Goldson himself; of which the able and satisfactory answers from every quarter bear ample testimony.

We are told, that Dr. Pearson coincides entirely in opinion with Mr. Goldson, in all his remarks in this chapter. He thinks with Mr. Goldson, that to such writers as have answered him, it is "important to enter into a controversy, but that the issue is of no importance to them." This is not the case with some other writers; who, if they have no character to lose, have certainly one to gain.

There is an article immediately subjoined to this Critical Examination, which appears, from its situation and style, to have been manufactured in the same quarter. It is entitled "Instancesof supposed Small-pox after Cow-pock." The obvious intention of this article is, not so much to injure the character of vaccination, as that of an individual engaged in the practice. If

If we may judge from the features of this singular performance, it is the offspring of resentment, and disappointed ambition. It is as complete a tissue of falsehood, as ever came from the press. We are told it is confirmed in every essential point by two witnesses. It requires some time to unravel such a fabrication; I pledge myself, however, to prove, by more than two witnesses, that it is a base compound of malice, ignorance, and falsehood.

I am, &c.

New Street, Hanover Square. JOHN RING.

CRITICAL ANALYSIS
OF THE
RECENT PUBLICATIONS
ON THE
DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

A Reply to Mr. Edlin's two Cases of Gout, said to have terminated in Death in consequence of the external Use of Ice and cold Water. To which is added, an Instance of the fatal Effects of encouraged Gout. With Observations, Cautions, &c. By ROBERT KINGLAKE, M. D. Physician at Taunton. 8vo. pp. 61.

THE particulars of Mr. Baker's illness were contained in our account of Mr. Edlin's Two Cases. In THE REPLY, Dr. Kinglake first remarks, that though the ACCOUNT states two cases in its title, yet it contains only Mr. Baker's, the second being supported on no other authority than the unrecorded recollection of an event which was supposed to have happened thirty years ago, and for which there is no testimony of professional men. Mr. Edlin might as well have written *three cases*, as he brings forward the late Doctor Gregory's, which rests on still worse authority than the former. It is first stated by an anonymous writer; afterwards contradicted by Dr. Duncan, in the last volume of Med. Commentaries; and, lastly, half confirmed by a passage taken from a MS. copy of Dr. Saunders's Lectures, beginning thus. "As far as I can learn, cold was the cause of the late Dr. Gregory's death." Besides the caution used by Dr. Saunders, there is every reason to believe that this lecture was delivered before Dr. Duncan had published the true statement of Dr. Gregory's death.

Dr. Kinglake, in his remarks on the account given of Mr. Baker's death, observes, that it is deficient in making no mention of the

previous

previous state of his health; (some other objections follow, which we shall at present omit) that the absence of fever is inconsistent with the existence of gout; that, by Mr. Edlin's account, Mr. Baker was doubtful whether the disease was gout; and that we are uninformed whether his habit was gouty; that, however, his treatment of himself was not only judicious but efficacious, inasmuch as he found relief: Still Dr. K. inquires, why ice should have been applied, before it was ascertained that water, at the temperature of the spring, was found insufficient? Not that the practice is objected to; on the contrary, we are told, it appears, as was before observed, by the effect, to have been highly proper.

'Mr. Edlin found "that the pain was quite gone, that the patient considered himself in some measure as well, and that the pulse was at 78;" a situation enviably convalescent, and, surely, such as might justify rising from bed. But fainting occurred in the exertion; no unusual accident after a confinement of some days by acute pain, but very unlikely to have happened in this case, in the formidable manner stated, as the patient not long afterwards took breakfast, and soon after that was encouraged, by his own feelings, to combat an incipient inflammation on his knees with the same remedy.

'A man of liberality far superior to what Mr. Edlin has discovered in the present controversy, and one possessing much less questionable claims to implicit credit than he in my estimation does, could not readily persuade me that a patient who had incurred a serious fainting fit by the use of a new remedy, would so quickly return to the charge, and subject himself to the renewed injury of a noxious agent. This procedure bears a much less resemblance to human nature, than it does to the possible fiction of Mr. Edlin.'

After this follows a transcript of Mr. Edlin's history of the disease, from the time he was sent for at one o'clock in the afternoon, with the following remarks:

"This paragraph contains the recital of symptoms which have every appearance of being most extravagantly exaggerated. The account is only conceivable (in my apprehension at least) by considering it as a renewal of a fainting paroxysm, from what cause does not appear. No complaint is made of pain; palpitation of the heart and icy coldness of the stomach are not characteristic symptoms of a high degree of visceral excitement; they rather indicate a diminution of motive energy, and are not explicable by any rational idea of transferred irritation. But what says the patient in this gloomy narrative? — Not one word. Is he speechless?—Is he either epileptic, or apoplectic? It does not appear so. Did he not, from his medical familiarity with disease, from his own sensations, and his own particular knowledge of his general health, assign any probable cause for the alarming change that had occurred? Did he attribute it to the cooling treatment he had undergone, or did he attempt its vindication from such a charge?

charge? These important facts are all wrapped in mysterious and suspicious silence. It may be fairly presumed, nothing was said by the patient to the disadvantage of his treatment, or it would have too well suited Mr. Edlin's purpose for him to have withheld the statement of it.

"Dr. Haworth saw the case at too late a stage to form a correct opinion of its cause. Mr. Edlin, no doubt, furnished him with sufficient grounds to persuade him (according to the prevailing notions of gout) that it was an instance of that disease having been repelled from the extremities. But the professional concurrence of Dr. Haworth and Mr. Edlin is no adequate authority for admitting their opinion of the case to be correct. It was founded on the vulgar and erroneous notion of the nature of gout. Neither of them, with all their flippancy of decision, ever saw a case of repelled gout.

"They might, in proportion to their opportunities for observation, have seen many instances of the protracted pain of gout in the joints of the extremities, having propagated by sympathetic influence, fatal irritation to the system; but blinded by groundless prejudices, they could not perceive this scientific truth. It appears to me, through the mists of Mr. Edlin's partial statement, that the disastrous course of this case did not arise from any irremediable grievance of the heart and stomach, but that it was rather induced by the stimulant treatment to which the patient was subjected; for it is observed he was liberally dosed with æther, camphorated julep, and opiated confection, and farther overwhelmed with external heat; however, perspiration at length occurred, and produced by its *cooling* influence some relief.

"The consultation with Dr. Haworth, is stated to have terminated in an approval of Mr. Edlin's mode of treating the patient! Though "the skin was burning hot, the pulse at 96 strokes in a minute, the tongue dry and furred, and the respiration hurried,' the stimulant treatment is prosecuted, with an avowed view of driving the repelled gout, back to the extremities; but alas! the *sagacious* endeavour missed its aim, and instead of replacing the remedial disease on the intended parts, it probably demolished the very fabric of life, by kindling, throughout the system, an inflammatory degree of morbid temperature.

"However this violent re-action of the arterial system was excited, it was repugnant to the most obvious laws of organic motion in the animal economy, and to every rule of common sense, to attempt to calm it by adding to its force. By such heating treatment, the visceral parts (to use a fiery but applicable metaphor) must necessarily be burnt to death, before the extremities could be even scorched with the combustive violence.

"The appropriate treatment would have been a well ventilated room, sponging the '*burning skin*' with cold water, at short intervals, and copious dilution with cool aqueous liquids. Brandy, and the whole tribe of igneous stimulants, should have been with-

held,

held, and the patient might possibly have recovered, whilst under the circumstances of his mis-management it is almost inconceivable that the termination could have been different from what happened."

Such is the general outline of this important controversy, to which we have endeavoured to shew our accustomed impartiality. But our duty as public censors will not allow us to pass over some improprieties in the manner in which it has been conducted. Mr. Edlin begins his account, " A physician in one of our western counties has been amusing himself," &c. Afterwards, in his conversation with the deceased, he tells us, " I hinted that it was possible these (Dr. Kinglake's) cases might be fictitious, and that I was sorry to see him (Mr. Baker) misled by so shallow a performance." The reader will allow, with us, that it is no apology for such language, that, in another place, it is said, " In offering these observations to the world, I bear no personal ill will to Dr. Kinglake." The best thing we can say is, that Mr. Edlin could not be perfectly aware of the import of his own words.

We sincerely wish Dr. Kinglake had considered the thing in this point of view; but he has certainly shown, that he has not, at all times, a just command of temper. Whilst, with much propriety, he discants on Mr. Edlin's *hint*, he might have suggested, with more delicacy, that " such a suspicion could only arise in a mind capable of such artifices." Nor was it necessary to introduce Dr. Blegborough, merely to accuse him of interested motives in his opposition to the cold treatment of gout. Mr. Perry too might have been dismissed in much fewer words, and without ridicule: and the observation concerning the physician who was consulted, might have been spared. It would have been more candid, to have attended only to his practice, without regarding his opinion on the statement of Mr. Edlin: and if (which will perhaps admit of a doubt) " palpitation of the heart, and icy coldness of the stomach, are not characteristic symptoms of a high degree of visceral excitement, but rather indicate a diminution of motive energy," it will follow, that stimulating remedies might be proper to restore this energy.

In this remark, we wish only to encourage a proper degree of candour, as the means of divesting each other of passion, the great source of error in all controversies. We wish also that Dr. Kinglake should see, that though we do not think ourselves obliged to give any opinion concerning a practice much older than our own days, yet that, to us, there appears a deficiency in this part of his theory. Sickness, and a sensation of coldness, have occurred, previous to a gouty paroxysm, and have been relieved by it. They have also occurred on the sudden disappearance of the gouty inflammation.

On this, therefore, and on all other occasions, we wish to see less of figurative language in so important a branch of philosophy as medicine; and cannot help regretting, that, in the passage we have selected,

selected, the author should consider the following as an "applicable metaphor:" "By such treatment the visceral parts must be burnt to death, before the extremities could be even scorched with combustive violence."

In some concluding observations, the author gives a case, in which the hot treatment of gout proved fatal. Though we have no doubt of the truth of every thing here stated; yet we wish, for the sake of the incredulous part of the public, that the name, at least, of the consulting physician had been added. We are aware this cannot always be done, from motives of delicacy to the surviving family of the deceased; but we regret the want of it exceedingly in this case.

Among his cautionary remarks, Dr. Kinglake observes, that 'the history of almost every medical improvement abounds with gross instances of illiberal opposition. The cooling treatment of the small pox, the proposal for alleviating the violence of that disease by inoculation; and, latterly, the further amendment of substituting for it the vaccine disorder, were severally resisted by dreadful denunciations; by the occasional production of disastrous cases; and by unrelenting personal invective against the benevolent advocates of the salutary recommendation.' This is all very just; and, as these practices have survived all this opposition, we doubt not, if Dr. Kinglake's improvement stands on as good ground, that it will maintain it as well as the others.

The Reply concludes with an earnest recommendation to the public, not to be alarmed by the publication of Mr. Baker's case; but to continue the use of cold water in all cases of gout. The practice, as we before remarked, is not new; but though discontinued, is not, on that account, to be supposed useless, or improper. The ancients, who had fewer remedies than we, made much greater use of baths, and with great success. The application of cold water in fevers is a very old remedy; though discontinued for a long series of years, till it was revived, with great success, by the physicians of our own days. In saying this, it is neither our wish to commend or condemn the remedy. Perhaps, like all others, there may be stages of the disease, or peculiarities of constitution, which would discourage even Dr. Kinglake from its use.

We wish much to know, whether any of our correspondents have tried the use of purgatives and bark, as recommended by Dr. Tavares, of Lisbon, in our Journal for August last.* By the doctor's experience on himself, as well as other numerous authorities, it appears not less successful than cold water, and is free from all the dangers which some apprehend from the latter.

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* This Review was written before we received Dr. Lowrie's Communication, contained in our last Number.

Observations

Observations addressed to the Public in general on the Cow-pox, showing that it originates in Scrofula, commonly called King's Evil, illustrated with Cases to prove that it is no Security against the Small-pox, also pointing out the dreadful Consequences of this new Disease so recently and rashly introduced into the Human Constitution; to which are added, Observations on the Small-pox Inoculation, proving it to be more beneficial to Society than the Vaccine. By R. SQUIRRELL, M. D. formerly Resident Apothecary to the Small-pox and Inoculation Hospital. Octavo, pp. 75. London, 1805.

IN the Introduction the Author expresses an apprehension that whatever he may say against the cow-pox may subject him to the imputation of prejudice, presumption, or conceit, and may be treated by some with ridicule and contempt. The latter, we conceive, the author has much the most reason to apprehend; but it does not become us to prejudge. Let us first trace the progress of his arguments in order.

They begin by stating Dr. Jenner's own account of the origin of the cow-pox, which, Dr. S. says, led him to suspect it was a species of scrofula. It would have been useful to hint how many species of scrofula there are, and how they are to be distinguished, or even to have said what he means by scrofula. This is followed by an analogical table of the opinion of farriers, respecting the grease, and of medical writers concerning scrofula. As the author quotes no authorities of farriers or physicians, it is not difficult to make the two diseases similar.

Next follow some remarks, indirectly addressed to parents; the principal object of which is to deter some from, and frighten others who have already adopted, vaccine inoculation. But before this it is remarked, that for any cause to produce scrofula the constitution must have a predisposition to that disease. Now this single argument oversets all the rest, for as a predisposition must be born with a person, consequently no inoculation can produce it. Various causes may indeed bring such a predisposition into action. Injuries of any kind, the long application of cold, and the presence of any local disease, are sufficient. Hence small-pox has produced it, more commonly what is called the natural small-pox, because in that mode the disease is most violent. Inoculation for the small-pox has however, in some cases, been sufficiently violent to induce scrofula in a predisposed constitution; and considering the immense number of vaccinated patients in so short a time, it is surprising so few, if any, fair cases can be produced in which scrofula has been excited. On the contrary, many well authenticated instances have occurred, in which scrofulous symptoms have disappeared in consequence of the new action excited by cow-pox. These remarks render it unnecessary that we should take notice of the author's proposed method of treatment to eradicate scrofula out of the constitution after it has been introduced by cow-pox.

Suffice it to say, that, in general, we disapprove his plan, even supposing scrofula to exist from any cause.

After this follow a number of cases, most of which were first related in our Journal, have since been frequently canvassed, and have at length tended to convince our readers, that notwithstanding any trifling inconveniencies which may sometimes have attended this important discovery, they are as nothing, compared to what happen from small-pox inoculation. Cases of supposed small-pox after vaccination are taken indiscriminately from every source, and no notice is added that they have all been animadverted upon so as to satisfy every impartial mind. Lastly, the work concludes with a warm recommendation of small-pox inoculation, and a comparative view of its advantages above vaccination. In this view no notice is taken that cow-pox can only be spread by inoculation, whilst small-pox, being infectious in its effluvia, may, by the preservation of an individual, endanger a whole neighbourhood. At length the author conceiving he has completely silenced the advocates of vaccination, spends a great deal of time and paper in proving the advantages of small-pox under inoculation, when compared with the casual disease. As this has ceased to be a question for near forty years past, we should have been surprized to meet with it now, were it not that the rest of Dr. Squirrell's book surprized us still more.

A Treatise on Lues Bovilla or Cow-pox. By BENJAMIN MOSELEY, M.D. Physician to the Military Hospital at Chelsea, &c. 8vo. pp. 100. London, 1804.

WHEN we peruse the work before us, we are at a loss to know whether the author is in earnest or joke. In these gloomy times, *dulce est desipere;* but still, when we consider the importance of the subject, and the dignity which Dr. Moseley wishes to attach to his profession, we are very much in doubt whether the garrulity of age has any share in this sportive production.

Those who are accustomed to Dr. Moseley's writings must also be aware, that a display of learning makes no inconsiderable feature in most of them. Yet we were still surprized to find the small-pox traced as far back as Hippocrates. Who but Dr. Moseley would have thought that young Silenus, whom the father of the art describes as dying of a fever excited by intemperance and over-exercise, should have fallen a victim to small-pox? We perfectly agree with our facetious author, for we still think him in joke, that Silenus has as good, we cannot say a better claim, to small-pox than any other whose case and symptoms are described in either Galen or Hippocrates. Though the whole description of the disease is different from small-pox, excepting that there was fever and eruption, yet Dr. M. has no difficulty in accommodating all this. He describes as much of the case as suits himself; and when he finds this little is different from the small-pox, he has an admirable knack

knack of throwing every thing into confusion. "In this case, says he, I have not detailed all the particulars, but I think enough appears to show it is not unreasonable to conclude that Silenus died of the small-pox. Hippocrates says, his πυϱ, or burning fever, succeeded excesses committed by his patient, in bodily exertions and drinking; and this may account for the violence of the symptoms."

But Sydenham says, that in proportion as the symptoms are violent, the eruption is early; and here, in spite of hard drinking, the eruption was protracted to the eighth day. Alas! our English Hippocrates had never seen Africa, the American Isles, Constantinople, &c. *He* rarely quotes Greek; and when he ventures on Scripture, we never find him producing the Hebrew text. What should he know of things common in hot climates? Hear Dr. Moseley!

"The eruptions being retarded till the eighth day, or until a little before death (three days are not a little out of eleven) is not uncommon in hot climates, when life can be protracted; in cases where the blood has broken down its boundaries, and runs off by stool and urine, or by uterine discharges; *with all the functions of nature in confusion.*" Now if we are to select cases which resemble each other when *all is in confusion;* that is, when a disease loses its true character, we need never be at a loss to find small-pox, or any disease we wish for.

But it was necessary to find small-pox in Hippocrates; and indeed, in our opinion, it should have been traced as far back as Moses, in order to confirm our author's theory. "The small-pox, says he, is an atmospheric disease. It appears and disappears like other epidemics." "Atmospheric diseases, whether contagious or not, which rage epidemically, are not to be put a stop to, until the inscrutable cause which feeds their rage is exhausted." But we would ask if small-pox, like yellow fever, influenza, and some other epidemic diseases, depends only on the peculiar state of the atmosphere, without the necessity of any specific contagion, how happens it, that many towns have, by prudent precautions, preserved themselves free from variolous invasion for so many years? And how happens it that, since inoculation for small-pox has been introduced, the disease is constantly kept up in London?

To be short, the theory our author labours to maintain is, that cow-pox, like some other morbid poisons, produces what he calls a febrile commotion in the lymphatic system. Let us give his own words:

"Excite a febrile commotion in the lymphatic system, and saturate it with cow-pox virus—and that will, for a time, keep out the small-pox."

"The more the lymphatic system is thus acted on, the greater and longer the security against the small-pox."

If there is any meaning in this, it must be, that, as soon as the fever from cow-pox is over, the constitution will be susceptible of

 small-pox,

small-pox; and if no fever is excited, nor any glandular affection, the constitution will never lose its susceptibility of small-pox. The contrary of all this has been in so many instances proved, that we wish our author would write in a graver mode, and explain his real meaning. At present we cannot be angry with one who entertains us so well; and the extreme good nature with which his pamphlet closes, makes us wish less exceptionable language had been chosen in comparing the Inventor of Vaccination with his immediate followers.

"Unfortunately for Dr. Jenner and his discovery," says our author, "he was not left to prosecute it deliberately in the country, and to investigate it in a quiet, philosophic manner, through a succession of many experimental years. The *manufacture* was still in its *embryo* (an odd state for a manufactory) when the raw materials were brought, unfit for use, to market; and they were snatched from his hands in their crude state by a set of medical jugglers, besotted and stupified with the gigantic novelty, and scattered like firebrands among the Philistines."

In our opinion, Dr. Jenner had completed his experiment sufficiently to make it known to the public; but we sincerely wish, with our author, that all his followers had shown the same honest investigation, the same temper, and the same caution, in their communications, as have distinguished the inventor.

An Examination of that Part of the Evidence relative to Cow-pox, which was delivered to the Committee of the House of Commons by Two of the Surgeons of St. Thomas's Hospital, with some Remarks on inoculated Small-pox. By W. R. Rogers; *illustrated with a coloured engraving.* Octavo, pp. 30. London, 1805.

By an Epistle Dedicatory, we find that Mr. Rogers is of the Herefordshire Militia; that he was formerly a pupil of Mr. Birch, and gathered most of his information from conversing with his teacher. We are ready to make large allowances for this attachment to preceptors, which always argues a grateful mind; but there is a time when men should think for themselves. However, we ought to add further, that this work is more free from personalities than most which have appeared on the subject; and if we make allowance for the frequency with which the author must have heard the question discussed on the side he has adopted, we may consider his production as the offspring of an honest, though, in our opinion, mistaken zeal.

The cases on which Messrs. Cline and Birch differed, were happily such as both agree in as to matter of fact, viz. that persons who have received the small-pox infection, and are inoculated with cow-pox before the eruption appears, are not secured from the first disease. Mr. Birch adds, that under similar circumstances the small-pox inoculation produces all the effects that are expected from it, as perfectly as when the patient has not been previously exposed to small-pox infection. As this is a subject that has often occurred,

occurred, and not been sufficiently discussed, we shall offer a few remarks before we proceed any further.

It has been long since remarked, that the period between the reception of the small-pox virus by effluvia, and the commencement of the fever is usually a medium of twelve days. That, on the contrary, the period between inoculation of small-pox and the commencement of fever is a medium of eight or nine days. Consequently, if matter is inserted three, four, and in some instances five days after infectious effluvia has been inhaled, the constitution may still have the advantage derived from inoculation, as the operation may supersede the effect of the disease from effluvia. It will at once occur, that it is difficult always to ascertain this fact, because in some cases the casual small-pox is as mild as the inoculated, and in others the inoculated shows all the severity of the casual. However, the facts which the diligence of different inoculators have accumulated are sufficient to establish the law.

In the cow-pox the question is more easily decided, because when eruptions follow, it is easy to ascertain whether they are variolous or vaccine, consequently we are never at a loss to ascertain whether vaccination has superseded a previous exposure to variolous effluvia.

Hitherto the parties seem to agree in one main point, namely, that if a subject has been so far exposed to the effluvia of small-pox as to be infected by it, the consequence of that infection has not been superseded by inoculation from cow-pox. Mr. Birch adds, that inoculation from small-pox, undersimilar circumstances, would have superseded the effects by infection. Mr. Cline does not seem, by the evidence here stated, to have marked that difference with so much decision; and the reason will presently appear.

In all those cases in which inoculation for cow-pox was performed early enough to supersede the effect of effluvia from small-pox, the patient had the latter disease milder. This makes it difficult to say that the inoculation by cow-pox was altogether inefficacious. This uncertainty is the greater, because, in one instance, small-pox appeared only four days after inoculation for cow-pox. Consequently, the child must have received the small-pox effluvia eight days before vaccination, a period at which *small-pox* inoculation would have proved no security. In this case the disease was very severe. It is probably for this reason that Mr. Cline was too cautious to venture on a comparison between the effects of small-pox inoculation and vaccination, under circumstances of previous exposure; and it is much to be regretted that this important question is not yet solved.

Another very striking difference between the examination of these two gentlemen is, that Mr. Birch gives no dates, and deposes that he kept no notes. Those who are at all accustomed to watching the progress of morbid poisons, must be aware how dangerous it is to trust to the memory, even in more minute circumstances; but when this deficiency extends to an ignorance of the days of expo-

 sure,

sure, inoculation, and eruption, the whole evidence amounts to nothing, because there is not a single foundation on which reasoning, much less inference, may rest.

After concluding the account of these examinations, our author informs us of 'Mr. Birch having taught his pupils the maxim, that experience was preferable to experiment.' We should have been at a loss to know the difference, had not the conclusion of the paragraph illustrated it. By this we find that it is better to avail ourselves of others' experiments than to perform them ourselves. This observation is in a certain degree just, because where we take the experiments of others, our own fidelity cannot be suspected. But under such circumstances we should either report the result as we receive it, or attend closely to the whole process, and make our own minutes with exactness. Neither of these were accomplished by Mr. Birch. He declined making the experiment, and trusted to his memory for the results. His evidence is therefore defective, and his *pupils* must learn better *maxims*, or how to apply them better, However, from these imperfect materials, Mr. Birch undertakes to draw conclusions which the premises, if better ascertained, would not infer. "Now, says Mr. Rogers, as it is agreed on all hands that the inoculation of small-pox, under similar circumstances, would supersede and destroy the infection naturally received, Mr. Birch took his stand on this ground, and has ever since steadily and firmly maintained, that on this account he was satisfied the experiment would not produce the results expected from it."

But fair induction, according to the common forms of logic, would never support Mr. Birch on such ground; for if we admit his facts, it will only follow that there is some difference not sufficiently understood between small-pox and vaccination, so that when a person has been exposed to the effluvia of the former, it may be safer to inoculate with small-pox, as a better ascertained means of superseding the effects of the casual infection. Mr. Cline, with his usual modest caution, leaves the question in doubt, how far the subsequent small-pox is not superseded by vaccination, but gives his opinion that the future disease is mitigated; "yet, adds our author, in the case of Mary Solloway, if I rightly understand him, Mr. C. states *the disease to have been very severe, but that the child recovered,*" No, Mr. Rogers, you do not rightly understand him, for you will find that the eruption appeared in four days after vaccination. In this case therefore the effluvia had been too long received for even *small-pox* inoculation to supercede its effects.

The author next examines the three positions admitted by the committee. The first is, that vaccination never proves fatal. The second, that it excites no new disorders. The third, that it is a perfect security against small-pox, and, in the end, likely to exterminate the disease.

In answer to the first, the author produces four cases. As these are all well known, we shall only express our astonishment that no more can be produced, considering the number of persons vaccinated

nated, and the great uncertainty of the effect of even a common puncture in some particular constitutions, or under some peculiar circumstances. Two of these cases have appeared before the public, in a variety of forms; the last is quoted from Dr. Squirrell, author of a Treatise on Indigestion, and vender of medicines.

The next position our author attempts to prove is, that cow-pox does, in some instances, excite a new disease different from itself. First, he says, it produces eruptions on the face and in other parts of the body. This is undeniable; but these eruptions are temporary, and are generally the effect of some previous inflammation, or breach of the skin, and much more frequently the new disease supersedes former eruptions, which have been of long standing.

2d. "A hasty abcess, which contains a fluid dissimilar to any other."—We shall be glad of further information on the subject of this hasty abcess, and its contents.

3d. "Glandular enlargements of the skin; at first the size of a pea, then growing knotty and hard, at length suppurating." In confirmation of this, we are referred to two cases; one of Rebecca Latchfield, daughter of a workman of Mr. Banks, in the Strand; the other, a child of a servant of Mr. East, in the Adelphi. We have before now heard of the head-dress of Pontius Pilate's wife's chamber-maid; and a reference to the daughter of a workman of Mr. Banks, Strand, and the child of a servant of Mr. East, Adelphi, reminded us of the venerable relic of a waiting-maid of that illustrious lady. If our author had given us his own authority, we should have been less anxious to satisfy ourselves as to the event of these cases, of which we have no information. As it is, our readers, who are anxious to know, will not require of us to advertise for the children of Mr. Banks's workman, or Mr. East's servant.

In the last place, continues our author, "with grief, (but confidently) I assert, that the great advantage which mankind were to have received from this discovery has not been attained; from its being no security in numerous instances, against the infection of the natural small-pox."

The *numerous* cases adduced by our author, amount to the few which have been repeatedly before the public. We doubt not more have occurred: for, when we consider the immense extent of vaccination, and that the same event has occurred after small-pox, both in the casual way and under inoculation, we cannot expect that cow-pox should be a better security. That there were instances of small-pox occurring a second time in the same subject, most of the different medical collections may prove. Dr. Adams, in his "Morbid Poisons," in which he has shewn so much industry in collecting facts from all quarters, and which was published before vaccination was introduced, not only admits the possibility of small-pox occurring twice in the same subject, but expressly adds, that he conceives a certain space must intervene before the susceptibility to the disease can be restored, (Morb. Poisons, page 55.

 Mr.

Mr. Rogers concludes with some remarks on the advantages of small-pox inoculation. It is not difficult to prove these when every unfavourable incident that has occurred under vaccination is dwelt upon with so much exactness, and inoculation after two years of age is said to be *almost* unattended with danger. But we are surprised to hear the author speak of *feelings* on this occasion. Where are the feelings that would voluntarily subject an infant, though more than two years old, to the fever certain on small-pox inoculation? Even if anxiety for greater safety should induce this, where are the feelings that would selfishly expose a whole neighbourhood to the danger of so dreadful a disease? Baron Dimsdale, whose name is brought forward on this occasion by our author, it is well known, advised general inoculation as a preventive of the spreading of the disease; and we cannot help thinking that the legislature would now be justified in appointing seasons, when notice should be given of permission for general inoculation for small-pox, as long as any part of the public retains its predilection for that disease.

Dr. Jackson, on the Treatment of Fevers.

(Continued from pp. 275—282.)

" There scarcely occurs an instance, where the febrile irritation obtains, in a perfectly equal degree, in every part of the system, at the same time. In one class the irritation is general,—the principal and leading circumstance,—the local affections are secondary and subordinate. In another class, the local derangement seems to be primary, at least it is principal; it demands and obtains the principal attention in arranging the plan of cure. In acute diseases, where inflammation of internal organs is a prominent or leading feature, bleeding is the first and almost the only remedy. In real inflammation of the lungs, and parts in the cavity of the thorax, (the most frequent and the most serious of local inflammation,) bleeding possesses a decided power of doing good; but, in order to be effectual, it often requires to be carried to an extent, which common opinion, in the present times, regards with horror. It is not possible, by any previous examination, to determine precisely the quantity of blood, which ought to be taken away in inflammation of the lungs and surrounding parts. The measure can only be determined by effect, as it arises under the operation. It is a constant rule never to be forgotten, that as an effect, that is, relief from certain destructive symptoms, is the object of the practice adopted; so that object must be ensured before the means are dismissed. The quantity of two pounds of blood, in real inflammation of the lungs, is not excessive; it is not alwass sufficient; it may even be carried beyond three, without danger to life; nay, the object in many cases is not attained, till actual fainting, or a strong disposition to faint, is induced.

" Where real inflammation exists, bleeding is an indispensable remedy;

remedy; but the existence of such condition is not always easily ascertained. It is apt to be confounded with pituitous suffocation, denominated peripneumonia notha; or with affections of respiration,—a fluctuating symptom of contagious fever. The distinction may often be known by actual inspection; it is difficult to detail the discriminating marks so precisely in description, as to preclude all ambiguity. — The real inflammation of the lungs, and parts within the cavity of the thorax, is generally attended with great tumult in the circulating system; but the expression of the fever is not always open; it is often, as it were, suffocated and oppressed; the heat is deep, strong and ardent, particularly on the chest; the pulse is usually frequent, but not uniformly so;—it is hurried, irregular, impeded in its movement,—without freedom or expansion; the heart sometimes beats, or throbs irregularly; and the whole organs concerned in circulation evidently labour, even struggle in the performance of their offices; the head-ach is frequently severe and rending, as if the skull were ready to split; sometimes it is heavy and oppressive; the eye is full and painful, the eye-ball distended, — glistening rather than inflamed; the countenance is flushed, clouded,—often grim and expressive of pain,—or dark and bloated; the respiration is hurried,—even to panting; the breath is hot; the lips dry,—with intense thirst; the cough is troublesome, dry, or without expectoration; the pains in the chest and sides are more or less severe;—sometimes sharp and stinging—aggravated by motion; sometimes obscure, dull, with a sense of oppression and difficulty of expanding the chest; the back and limbs ache severely, as if all the moving parts were broken and disjointed; together with these, there are particular sensations of heavy distress,—a sense of fulness, and a suspension of natural secretions. Such form of disease is more common in cold weather than at other times; and its origin is often traced to sudden or long exposure to cold.—When the symptoms described are present, blood must be taken away without loss of time. It is adviseable, that it flow from a large orifice; and that it be allowed to flow till the symptoms are completely removed; till the chest can be filled with ease and freedom; till sweat and relaxation of excretories take place; in short, till the existing movement be completely subverted. The foundation of cure is then laid, and the course of the disease is short.

"Bleeding is thus a powerful means in the cure of acute diseases; capable of a great deal of good, or a great deal of harm, according to the circumstances under which it is applied, and the mode in which it is managed. It arrests perverted movement, or it increases susceptibility to impression; in consequence of which, other remedies become capable of producing those motions, which are analagous to, or which are the identical movements of health. In this view, it is useful in the commencement of fever. If indeed the circumstances, in which it is employed, be the proper ones, and the management of the remedy be well conducted, it

it seldom fails of producing a salutary effect. In the advanced stages of acute disease, it is only useful occasionally; for its effects are only decided, where the movements are not yet rooted, that is, where they do not yet tend, by a regular though diseased process, to an issue, which terminates the course of the derangement. In such case, it is subordinate; in the beginning, in some forms of disease, it may be said to be sovereign.

"In the emetic class of remedies is found another of the powerful aids employed by medical men, in arresting the perverted rhythm of organic movement, and in restoring susceptibility of impression, preparatory to the application of other means. The emetics of the antimonial class act powerfully, and, if properly managed, produce great effect upon animal bodies. They are often employed in the early stages of fever; and in some conditions and stages of fever, their benefits are signal. The lancet commands the cure of a certain form of fever, the action of which is manifested in the grosser circle of circulation; emetics have great power, where the action is directed to organs of secretion,—not where the functions are suspected, but where the process is in some manner changed; more particularly, where the diseased organ is connected with the part upon which the action of the emetic has its first and immediate operation. But though emetics are eminently useful, they are not indiscriminately useful. The conditions which define their use, require to be well and minutely considered:—the present view is only an outline. In the first form of fever, that is, the plethoric, where the action is so particularly manifested in the grosser circle of circulation, and where the advantages of bleeding are so obvious; a form of disease frequent in spring, in dry weather, and among Europeans soon after their arrival in tropical climates, the use of emetics is not beneficial, not proper, perhaps not safe, without previous preparation. On the contrary, where there are congestions in secreting organs, or rather excess of secretions, as of bile and mucus, their benefits are great and evident. They are then commonly employed; and they are employed with manifest advantage, in intermittents, remittents, and autumnal bilious fevers, in diarrhœa and dysentery, in most forms of catarrhal affection, or defluxion on the lungs, in epidemic or erysipelatous sore throat, in eruptive fevers, and generally in specific contagions. In the artificial contagious fever, the cause of which is generated in crouded places, and the action of which has its first effect upon the stomach and bowels, an emetic is the first, as it is the peculiar remedy. It often alone removes the disease in the beginning. Even after the febrile irritation has become general, if the process be not far advanced in progress, so as to be engrafted in the action of the system, an emetic, followed by warm and cold bathing, and that followed by the application of blisters to the forehead, temples, neck, or between the shoulders, frequently cuts it short; at least, perfectly removes the danger, which might be expected to ensue from the continuance of it. But while emetics are useful in con-

gestions

gestions connected with increased quantity and changed condition in the secretions, they are not useful in congestions in the actually circulating system, that is, in inflammation of parts or organs, no more than they are in general fever connected with plethora and accompanied with suspension of natural secretions.

It would require much detail, to identify all the circumstances and conditions, and to estimate correctly all the advantages or disadvantages which result from the use of emetics; but it may be considered as a general rule, and, it is believed, it is a safe one, that emetics have no place where the action of the disease is chiefly manifested in the circle of the greater circulation, with suspended secretion, the case in which the lancet is so useful. On the contrary, where the action of the disease is manifested in the secretions of secreting organs, in which case bleeding is rarely necessary, the benefits of emetics are remarkable. Besides a previous and correct estimate of the conditions, which prescribe the use of emetics in acute diseases; the manner of exhibiting the remedy, and of managing the patient while under its operation, deserves some consideration, in order to ensure fully the beneficial effect. In diseases of the intermitting, remitting, and bilious forms, the antimonial emetics obtain the preference, as they ought in all cases, where strong and general effect is required. It is necessary, in the exhibition of emetics, that the state of the stomach, if not naturally, be rendered artificially susceptible of the full effect of the operation. In diseases, with an increase of the bilious secretion, or in constitutions which naturally possess the bilious character, the operation of emetics is generally full and effective, and the benefits are in proportion. In accidental conditions of disease, or in constitutional circumstances of subject, where this character is wanting, or where the excess of secretions tend to phlegm, the stomach is acted upon with difficulty, and the effect of the operation is then seldom complete. In such case it is adviseable to give some water, as hot as it can be drank, either alone, or with the addition of an alkaline salt, previous to the exhibition of the emetic. It is farther adviseable, that persons, under the operation of emetics, be placed in bed, well covered with clothes, and that the air of the apartment be rather of a high temperature. It is also serviceable in many cases, as aiding the effectual operation, that the feet be previously bathed in warm water, or that the limbs be fomented with cloths wrung out of hot water; in short, that the general sensibility to impression be increased, as well as that the condition of the stomach itself be consulted, and previously disposed to answer effectually in operation."

[To be continued.]

Account of Diseases in the Finsbury Dispensary, from March 20, to April 20, 1805.

Rheumatismus	9	Chlorosis	15
Pneumonia	6	Icterus	3
Hæmoptysis	3	Dysenteria	11
Phthisis	12	Morbi Cutanei	13
Menorrhagia	7	Morbi Infantiles	16
Leucorrhœa	7	Asthenia	19
Apoplexia	2	Neuroses	16
Paralysis	8		

The Reporter has lately been called to several cases of what were simple asthenia, but which had been previously regarded, and treated as inflammatory affections of either the thoracic or abdominal viscera.

Pain is generally, but in many instances unjustly, considered as an evidence of inflammation. It more frequently arises from the difficulty with which a debilitated and obstructed organ performs its accustomed and salutary office. Blisters relieve pain; but it is not so much by their evacuating as their stimulating operation. They are cutaneous drains. In cases, however, of extreme or chronic debility, such external applications are calculated to aggravate the degree, and perpetuate the existence of that weakness with which the patient is already afflicted. By acting upon the nervous system, or the sensorial power, blisters cannot be of any permanent or essential service. What produces pain cannot relieve pain, except by diverting the attention from one uneasy feeling to another. But, in such instances, the influence of the imagination is vague, and almost unlimited in its extent. The remedy prescribed has not so much effect as the reputed character of the prescriber. A patient who feels an imperfect faith in his physician, is not likely to experience the due efficacy of his medical direction. And, on the other hand, an entire confidence in the information and talents of a professional adviser, not seldom gives a salutary efficacy to remedies which would, otherwise, have been insufficient, or injurious in their physical operation.

Patients have recently occurred, in the practice of the Reporter, among both the elegant and vulgar classes of society, who were affected with what are called nervous diseases; a class, in nosology, which may be made to comprehend, or to be connected with, nearly all the corporeal as well as mental afflictions to which the human frame

frame is liable. Nervous diseases are, in general, treated with too little delicacy and respect. No maladies are calculated more to interest the feelings of a humane man, or are more likely to receive alleviation, if not a radical cure, from a skilful and attentive practitioner. But, in such cases, the operation of moral agents ought to be more especially studied and applied.

The feelings of the mind should be watched and examined more than the functions of the body. Medicine, in such instances, is of important advantage; but amusement, or more serious occupation, is of radical and essential consequence.

In several instances, which the writer of this article has recently had an opportunity of observing, opium has not produced the intended and desired state of sleep and composure, but, on the contrary, has given rise to restlessness, and symptoms of morbid irritability and delirium. On which account he had recourse to hyoscyamus* as a substitute; which, while it acts as an opiate, is not followed, in its operation, by those inconvenient and obnoxious consequences which are apt to arise from the administration of laudanum, or of the drug in its solid form.

There is an extreme difficulty, more particularly in nervous diseases, in adjusting the dose, and selecting the particular formula of pharmaceutical prescription, as its efficacy depends so much on the uncertain susceptibility of the patient, which, in some instances, is extended to the highest, and, in others, reduced to the lowest degree of irritability, and capacity of excitation. "On comparing the situation of an hysterical female (says a modern author of ingenuity and eloquence) liable to distressing agitations from the most trifling causes, as the dropping of a hair-pin on the floor, to that of the engineer who stands unmoved amid the thunder of a battery; of the seaman who maintains his footing on the deck or ropes of his vessel, reeling under the shock of the elements; or of the Indian who exhibits the signs, and probably feels the throb of intense delight, while the flames are preying upon his flesh: how astonishing do we find the range in human susceptibility to the effect of the powers by which we are surrounded!"

J. REID.

Grenville-street, Brunswick-square, April 25, 1805.

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* Hyoscyamus was a favourite remedy with Dr. Rutherford, of Edinburgh, for whose character and skill the writer of this article shall always feel the highest degree of reverence and esteem.

MEDICAL AND PHYSICAL INTELLIGENCE.

[FOREIGN AND DOMESTIC.]

Spontaneous Origin of the Rabies in Dogs, from a Communication of Mr. HANNIBAL W. DOBBYN, *to* Dr. MITCHILL, *of New York, dated Janury* 26, 1802.

As I often reflect with attention on your doctrine of septon and on its effects, it appears to me that I shall be able to prove it to be the remote cause of rabies, hydrophobia, &c. in dogs. The following facts I adduce to support the assertion. In the autumn of the year 1782, a mania broke out amongst a pack of fox hounds which I had in Ireland, consisting of thirty couple; they were kept in a kennel, enclosed by a wall fourteen feet in height. I lost the whole of them by it, as I found that any fresh dogs brought from nurse, when put into it, were seized by the disorder, without being bit by any other animal whatsoever. I threw down the walls on two sides of the square, and had the rooms, boiler, vessels, &c. well washed with soap and water, and afterwards with vinegar; after which the place remained unoccupied for six months. I then brought home twenty-seven couple of whelps from nurse, amongst which I was not a little surprized to see the disorder begin to make its appearance in about a month after their arrival. I endeavoured to find out a cause in vain, for this disorder; it could not arise for want of a free circulation of air, as the walls were thrown down which might obstruct its progress; it could not proceed from the victuals, as I inspected them myself, and took proper care that they should be of the best sort, and that they should be well dressed and boiled. The back door of the stable opening into the kennel, the manure was thrown out into it: I observed that many of the dogs prefered sleeping amongst it, of a cold day or night, on account of the heat produced by its fermentation, to sleeping in the rooms of the kennel. Such of the hounds that did so, I observed were always seized with the distemper, and that it originated with them; and also that dogs, which lay in the litter with the horses in the stable, were seized with it, while those who slept in the haggard, under corn stacks, or amongst the hay, always escaped. From these observations I was certain that this distemper was occasioned by putrefaction, but how I was unable to comprehend. I endeavoured to ascertain the cause by dissection, and opened above a dozen of those which died of the distemper. Besides all the other symptoms common in the mania, I found the fleshy parts of the liver in a state of solution; in proportion to the progress of the disease, the larynx, &c most dreadfully constricted. May not the septic

septic acid, taken up by those dogs from the dunghill and stable, be the cause of their madness, and, by dissolving the liver, the acrid effects of which operating on the larynx, cause that constriction which produces the hydrophobia? which can be, in my humble opinion, nothing else, but the highest degree possible of irritation of the nervous system, as a looking-glass kept in motion, before the eyes of a dog, produces the same effect on the system as water, into which, in a dark room, he will put his mouth, and endeavour to drink. And that those dogs were infected with the rabies, is confirmed by this proof, that all animals bit by them went mad (two cases excepted) in about fifteen days."

The following translation of a very flattering address in the German language to the Royal Jennerian Society, with Report of the Progress of the Jennerian Inoculation on the Confines of European Turkey, and the Report from India, have been handed to us by Dr. Walker.

The undersigned, late Province Physician at Varasden, in Croatia, in the years 1802 and 1803, (being encouraged by many successful examples, and supported by legal authority) inoculated above 1500 children, in his district, with cow-pock matter, received from Dr. De Carro, in Vienna, some of the children of high but most of low rank, and all with perfect success. Many of these were afterwards re-inoculated with the small-pox, without the smallest ill consequence, and he has had the pleasure of spreading the cow-pox, in the neighbouring countries of Hungary and Steyermark.

Penetrated with gratitude and the most profound respect towards Dr. Jenner, the Discoverer of Vaccine Inoculation, he thinks it his duty, and an honour, to communicate the intelligence thereof to the meritorious Royal Jennerian Society, in his own name, and that of every friend of humanity who has taken an interest in this heavenly benefaction.

MATTHEW GREGORIUS KRASKOVITZ,
Feb. 1, 1805. Practitioner at Vienna.

Report of Patients vaccinated by Mr. J. THORPE, Superintending Surgeon, in the Province of Guzurat and Surat, for the month of May, 1804. At Baroach, 113; Baroda, 200; Cambay, 112; Dholka, 70; Kairah, 20; Surat, 70; in camp, 221; total 806.

Mr. TAUNTON will resume his Summer Course of Lectures on Anatomy, Physiology, and Surgery, on Saturday, May 25, at eight o'clock in the evening, *precisely*, at the Finsbury Dispensary, St. John's Square. Practical Anatomy and Demonstrations in the forenoon as usual. Particulars may be known by applying to Mr. Taunton, No. 10, Pater-Noster Row, Cheapside.

Dr. JOHN REID is preparing for the press a work on the Nature, Progress, and Cure of Consumption, which will be published in the course of the autumn.

The Editors are sorry to have occasion to announce the decease of their Colleague Dr. Noehden, at Gottingen, a gentleman whose labours have so powerfully contributed to the reputation and great success of the Medical and Physical Journal. Arrangements are making, by means of which they hope to be able, in the next Number, to announce an able successor to their lamented Colleague, in the Department of Foreign Correspondence and Intelligence.

A Meteorological Table, by Dr. HIGGINS, *of Brompton, from Jan. 22, to Feb. 21, 1805.*

Days of the Month.	Thermometer Fahrenheit. 8 o'Clock Morning.	Noon.	10 o'Clock Night.	Centegrade Noon.	Height of the Barometer. Inches. 8 o'Clock Morning.	Noon.	10 o'Clock Night.	Deg. of Evaporation by the Hygrometer	WEATHER.
Jan. 22	32°	34°	32°	1.11	29.33	29.28	29.27	8°	Cloudy, ſnow in the evening.
23	31	33	29	0.55	.38	.49	.76	10	Snow.
24	30	31	28	below 0.55	.93	.96	30.01	13	Cloudy.
25	31	35	29	1.66	30.05	30.08	.10	17	Cloudy.
26	28	29	28	below 1.66	.16	.18	.20	14	Cloudy.
27	28	30	28	1.11	.18	.14	.11	20	Cloudy.
28	28	29	30	1.66	.02	29.90	29.68	14	Cloudy.
29	31	36	32	2.22	29.41	.29	.11	16	Cloudy, ſnow in the evening.
30	33	35	33	1.66	.10	.10	.19	10	Cloudy, rain in the evening.
31	34	33	31	0.55	.42	.57	.81	14	Cloudy.
Feb. 1	29	30	27	below 1.11	30.01	30.05	30.20	20	Cloudy.
2	23	32	28	0.00	.31	.33	.47	18	Fair in the morn. ſnow in the evening.
3	29	39	32	3.88	.54	.54	.53	14	Cloudy.
4	35	42	46	5.55	.18	29.96	29.30	16	Cloudy, rain in the evening.
5	44	46	32	7.77	29.03	.00	.51	14	Showery.
6	29	33	28	0.55	30.07	30.21	30.35	30	Fair.
7	34	39	38	3.88	.35	.26	29.93	21	Cloudy, rain in the evening.
8	44	49	48	9.44	29.92	29.96	.96	10	Showery.
9	52	54	48	12.22	30.08	30.14	30.13	16	Cloudy, rain in the night.
10	46	54	44	12.22	.12	.07	.01	21	Cloudy.
11	40	40	34	4.44	.01	.04	.20	13	Cloudy.
12	35	39	33	3.88	.32	.41	.61	30	Fair.
13	35	39	29	3.88	.70	.72	.65	20	Cloudy.
14	30	40	34	4.44	.60	.50	.48	24	Fair.
15	35	38	34	3.33	.49	.50	.55	16	Cloudy.
16	33	40	28	4.44	.55	.56	.45	25	Fair.
17	30	37	30	2.77	.42	.36	.34	28	Fair.
18	32	37	30	2.77	.29	.26	.29	19	Fair.
19	30	38	28	3.33	.36	.38	.47	22	Fair.
20	30	38	36	3.33	.49	.42	.38	18	Cloudy, rain in the evening.
21	42	46	48	7.77	.25	.16	.02	10	Rain.

To CORRESPONDENTS.

Communications are received from Dr. Kinglake, Mr. Forbes, Mr. Howard, Mr. Pearson, Mr. Waiblinger, Mr. Wilkinson, Mr. Dunning, Mr. Highmore, Sir John Sinclair, Bart. Dr. Walker, Mr. Simpson, Mr. Jenkinson, D. L. and Mr. Bethune.